

## **Highland, Matt**

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**From:** Allison, Julie A. <jalliso1@dhs.state.ia.us>  
**Sent:** Friday, December 01, 2017 8:38 AM  
**To:** Kane, Debbie  
**Cc:** Jodi Tomlonovic; Wendy Rickman; Denise.Wheeler@idph.iowa.gov  
**Subject:** Re: DHS workgroup

Hi all,

Just an FYI. As you know we have been contracting with the University of Iowa (for the IFPN work) thus we reached out and invited them to the group. They have identified Betsy as their representative.

Thanks,

Julie

On Tue, Nov 28, 2017 at 2:53 PM, Kane, Debbie <[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)> wrote:  
That's an excellent idea.

Debra J. Kane, PhD, RN, PHCNS-BC

MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention  
Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319  
P: 515.281.4952 | F: 515.725.1760 | [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)

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On Tue, Nov 28, 2017 at 2:49 PM, Jodi Tomlonovic <[jtomlonovic@fpcouncil.com](mailto:jtomlonovic@fpcouncil.com)> wrote:

Hi Wendy & Julie

I apologize for thinking of this after you set up the Data Workgroup but Denise and I think we should include Pete Damiano from the University of Iowa in the Data Workgroup. As you know, Pete and his group conducted the evaluations of the IFPN for DHS's requirements to CMS.

I don't know if you think it is too late – but we believe he would have some good perspectives about the data and how to look at it.

Jodi

Jodi Tomlonovic

Executive Director

Family Planning Council of Iowa

108 3rd Street, Suite 220

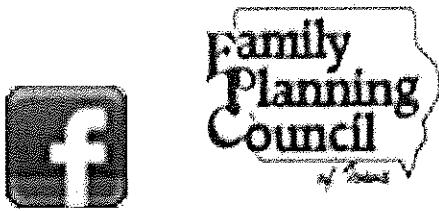
Des Moines, IA 50309

Phone: (515) 288-9028

Fax: (515) 288-4048

jtomlonovic@fpcouncil.com

www.fpcouncil.com



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--

Julie Allison, MPA

Child Care Bureau Chief

Iowa Department of Human Services/Division of Adult, Children and Family Services

1305 East Walnut, Hoover State Office Bldg., 5<sup>th</sup> floor, Des Moines, Ia. 50319-0114

## Highland, Matt

---

**From:** Allison, Julie A. <jalliso1@dhs.state.ia.us>  
**Sent:** Wednesday, November 29, 2017 3:11 PM  
**To:** Rickman, Wendy  
**Cc:** Kelly Lindsay  
**Subject:** Re: draft email to U of Iowa - IFPN evaluation & State Family Planning Program work group invitation

great

On Wed, Nov 29, 2017 at 3:03 PM, Rickman, Wendy <[wrickma@dhs.state.ia.us](mailto:wrickma@dhs.state.ia.us)> wrote:  
i am good..Thanks

----- Forwarded message -----

From: **Lindsay, Kelly** <[klindsa@dhs.state.ia.us](mailto:klindsa@dhs.state.ia.us)>

Date: Wed, Nov 29, 2017 at 2:55 PM

Subject: draft email to U of Iowa - IFPN evaluation & State Family Planning Program work group invitation

To: Wendy Rickman <[wrickma@dhs.state.ia.us](mailto:wrickma@dhs.state.ia.us)>, "Julie A. Allison" <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)>

Please make any edits/corrections needed. thank you.

Hello,

The 2016 Annual Evaluation Report for the Iowa Family Planning Network (IFPN) Waiver Demonstration is needed ASAP as the report is past due for CMS. In previous emails with Betsy, I had asked the final version of the report be provided by November 17, 2017.

As you know, effective July 1, 2017, the IFPN program was discontinued and replaced by the State Family Planning Program (FPP). In order to monitor any impacts of this change, DHS and partners have formed a work group to compile data for a dashboard report. We would like to invite PPC to participate in this work group, please let me know if you are interested.

Thank you,  
Kelly Lindsay  
Medicaid Program Manager  
Iowa Department of Human Services  
office: 515.281.5334  
email: [klindsa@dhs.state.ia.us](mailto:klindsa@dhs.state.ia.us)

--

## Highland, Matt

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**From:** Allison, Julie A. <jalliso1@dhs.state.ia.us>  
**Sent:** Wednesday, November 29, 2017 3:10 PM  
**To:** Davis, Rebecca  
**Cc:** Kane, Debbie; Matt Briggs; Lindsay, Kelly; Deborah Johnson; Denise Wheeler; George Signs; Matt Highland; Merea Bentrott; Wendy Rickman; Julie Lovelady; Brenda L. Freshour-Johnston  
**Subject:** Re: Revised DRAFT FFP Report with data dictionary - response requested by Noon on Wednesday, November 29

Hi all,

We decided in the meeting that we would use where the member lives. In regards to the other questions I understand you are reviewing earlier data pulls to mirror for this report thus will wait for you to assess.

Thanks,  
Julie

On Wed, Nov 29, 2017 at 11:57 AM, Davis, Rebecca <[rdavis@dhs.state.ia.us](mailto:rdavis@dhs.state.ia.us)> wrote:  
Julie,

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Also on page 17, the services have been broken out into 5 categories. Core will need to know which CPT codes need to be pulled to each category.

Thanks,

**Becky Davis**  
Business Analyst  
Core Unit  
Iowa Medicaid Enterprise  
515-974-2950 office  
[rdavis@dhs.state.ia.us](mailto:rdavis@dhs.state.ia.us)



On Tue, Nov 28, 2017 at 8:45 AM, Allison, Julie A. <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)> wrote:  
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Please send data to Brenda, [bfresho@dhs.state.ia.us](mailto:bfresho@dhs.state.ia.us) and cc Julie Allison

Please submit in the following format:

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We would like to receive the data by EOD 12/11/17. Let me know if this is not going to be realistic but the goal is to have a majority of the data loaded into the report for review on 12/15/17.

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Julie

On Thu, Nov 16, 2017 at 4:14 PM, Allison, Julie A. <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)> wrote:

Hi All,

Just a quick note and "heads up". I will be sending the next draft version of the FPP report on 11/27 and will be requesting (CORE/IME, ACFS, IDPH) first quarter data and SFY17 verification if provided or provide SFY17. Would like to have the data by 12/11 so that we can drop it into the FPP report and review on 12/15 (Oversight). I will send the format for data submission on the 27th.

Hope you have a great Thanksgiving!

Julie

On Thu, Nov 16, 2017 at 10:32 AM, Kane, Debbie <[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)> wrote:

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On another note, please watch your email for a doodle poll. Per our discussion at yesterday's meeting, the data group will need to meet in December - we will probably need 2 meetings.

Thanks,  
Debbie

Debra J. Kane, PhD, RN, PHCNS-BC

MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention  
Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319  
P: 515.281.4952 | F: 515.725.1760 | [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)

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**From:** Allison, Julie A. <jalliso1@dhs.state.ia.us>  
**Sent:** Wednesday, November 29, 2017 3:07 PM  
**To:** Wendy Rickman  
**Subject:** Fwd: Revised DRAFT FFP Report with data dictionary - response requested by Noon on Wednesday, November 29  
**Attachments:** Contraceptives\_Approved\_20171114.pdf

forgot you....

----- Forwarded message -----

From: **Allison, Julie A.** <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)>  
Date: Wed, Nov 29, 2017 at 3:06 PM  
Subject: Re: Revised DRAFT FFP Report with data dictionary - response requested by Noon on Wednesday, November 29  
To: "Davis, Rebecca" <[rdavis@dhs.state.ia.us](mailto:rdavis@dhs.state.ia.us)>, Matt Briggs <[mbriggs@dhs.state.ia.us](mailto:mbriggs@dhs.state.ia.us)>, Julie Lovelady <[jlovela@dhs.state.ia.us](mailto:jlovela@dhs.state.ia.us)>, "Johnson, Deborah" <[djohnso6@dhs.state.ia.us](mailto:djohnso6@dhs.state.ia.us)>

Hi all,

Great questions Rebecca! I think we should talk about these decisions internally. I will send a note in response to the "all" group just in case.

For pages 8-13, the services are broken out by region - do we determine the region by where the member lives or by where the provider's office is? In the meeting we agreed to where the member lives

Also with the providers - we have 3 levels of providers on the claim - 1) rendering 2) the billing and 3) pay-to provider. Our current data bill is by rendering provider. If we use rendering provider, we will never show a FQHC or RHC as the provider. FQHC/RHC as a provider type can only bill T1015 which is not a covered FPP/IFPN service.

Would ask that you consult with Deb and Julie. I know that we have released a list of providers before and not sure what you used or how that was pulled. I believe Harrish may recall. We have to be able to pull FQHC and RHC.

Also on page 17, the services have been broken out into 5 categories. Core will need to know which CPT codes need to be pulled to each category.

Please consult with Deb and Julie regarding CPT codes. I think but could certainly be incorrect that the file you are preparing for Debbie Kane (attached for your reference) includes CPT codes because that is something Debbie Kane brought up. The attached service request is being used by Debbie for her data points/contributions to the report.....

Thanks,  
Julie

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Business Analyst  
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515-974-2950 office  
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Thanks,  
Debbie

Debra J. Kane, PhD, RN, PHCNS-BC

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P: 515.281.4952 | F: 515.725.1760 | debbie.kane@idph.iowa.gov

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Julie Allison, MPA

Child Care Bureau Chief

Iowa Department of Human Services/Division of Adult, Children and Family Services

1305 East Walnut, Hoover State Office Bldg., 5<sup>th</sup> floor, Des Moines, Ia. 50319-0114

Phone: 1-515-281-6177

Fax: 515-281-6248

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Julie Allison, MPA

Child Care Bureau Chief

Iowa Department of Human Services/Division of Adult, Children and Family Services

1305 East Walnut, Hoover State Office Bldg., 5<sup>th</sup> floor, Des Moines, Ia. 50319-0114

Phone: 1-515-281-6177

*Iowa Department of Human Services*  
**Data Warehouse Data Request**

<b>Request Date:</b> 11/8/2017	
<b>Project Title:</b> Calculate contraceptive performance measures: IFPN compared to new State Family Planning Program	
<b>Requested By:</b> Debra Kane	<b>Phone:</b> 515-281-4952
<b>Alternate Contact (optional):</b> Click here to enter text.	<b>Phone:</b> Click here to enter text.
<b>Recipient of Data (if different than Requester):</b> Click here to enter text.	
<b>Completion Date:</b> 12/29/2017	<input type="checkbox"/> Desired <input checked="" type="checkbox"/> Required/Mandated

**Origin of Request**

<input type="checkbox"/> Federal Mandate	<input type="checkbox"/> Legislative Mandate	<input type="checkbox"/> Director Request / Internal Priority
<input type="checkbox"/> Policy Need	<input type="checkbox"/> Field Need	
<input checked="" type="checkbox"/> Other (specify): To calculate required adult quality measures for contractor (IME) )		

**Ongoing Schedule**

<b>How often does this need to be repeated</b> Quarterly – after initial request	<b>End date</b> 9/9/2019	<b>Recipient(s) of the ongoing data</b> Iowa Department of Public Health
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**Delivery of data**

<input type="checkbox"/> New SFTP (Internal)	<input type="checkbox"/> Existing SFTP (Internal)
<input type="checkbox"/> New SFTP (External)	<input checked="" type="checkbox"/> Existing SFTP (External)
<input type="checkbox"/> Internal File Share	<input type="checkbox"/> Email
<b>IP/folder of data delivery location</b> Click here to enter text.	

**Request Description:**

All paid claims for calendar year 2017 (January 2017 thru September 2017 to prepare to legislative session)

Please include the following variables:

Medicaid ID, claim type, county of participant residence, participant DOB, drug code, drug generic code, diagnosis codes, procedure codes, program code, service category, service date, mco indicator, pay to provider npi, pay to provider name, pay to provider type, provider county, provider specialty code, treatment provider name, treatment provider npi

**How do you want the data filtered?**

Female participants between the ages of 15 and 44

What format do you want the data delivered?

Tab delimited text file

**Implementation Plan: (Will this require policy/manual changes? If yes please explain):**

No

**Names of staff to be included in verifying data:**

Click here to enter text.

**Please address any other issues:**

Please include file layout.

**Does this request require the use of Encounter Data? If so, in what way?:**

Yes – to assure that we capture all claims and encounters related to family planning and as such accurately calculate the required performance measures.

Approved

Not Approved

Date

11-14-17

Bureau Chief or Deputy Director

Date

11-14-17

Mikki Stler, Medicaid Director

Please submit this request to your department Bureau Chief or Deputy Director for approval.

Once approved, forward to Medicaid Director for final review.



Schlueter, Robert &lt;rschluue@dhs.state.ia.us&gt;

**Re: Data request**

1 message

**Schlueter, Robert** <rschluue@dhs.state.ia.us>  
To: "Lovelady, Julie" <jlovela@dhs.state.ia.us>

Mon, Nov 13, 2017 at 2:47 PM

No questions - I intend to ask you to sign those at our 7:30 A meeting tomorrow.

On Wed, Nov 8, 2017 at 12:33 PM, Lovelady, Julie <jlovela@dhs.state.ia.us> wrote:  
Bob - Please let me know if you have any questions regarding this request. Thanks.

----- Forwarded message -----

From: **Allison, Julie A.** <jalliso1@dhs.state.ia.us>  
Date: Wed, Nov 8, 2017 at 11:53 AM  
Subject: Fwd: Data request  
To: "Johnson, Deborah" <djohnso6@dhs.state.ia.us>, Julie Lovelady <jlovela@dhs.state.ia.us>  
Cc: Wendy Rickman <wrickma@dhs.state.ia.us>

Can you guys touch base with Bob Schlueter so he is on board with this request?

----- Forwarded message -----

From: **Kane, Debbie** <debbie.kane@idph.iowa.gov>  
Date: Wed, Nov 8, 2017 at 11:37 AM  
Subject: Data request  
To: "Schlueter, Robert [DHS]" <rschluue@dhs.state.ia.us>  
Cc: "Julie A. Allison" <jalliso1@dhs.state.ia.us>, "Davis, Rebecca [DHS]" <rdavis@dhs.state.ia.us>

Hello Bob,

I am working with the group that is assessing access to contraceptive services in the new state funded program. I have been asked to calculate the contraceptive performance measures in the same manner that I am calculating the measures for the MIHI grant. The bottom line is that I am asking for the same data, only I need the current year's data now, rather than waiting for the full calendar year. The group hope to report access and measures on a quarterly basis after this initial data request.

Let me know if you have questions.

Thanks,  
Debbie

Debra J. Kane, PhD, RN, PHCNS-BC  
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Medicaid Program Manager  
Iowa Department of Human Services  
office: 515.281.5334  
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**Sent:** Tuesday, November 28, 2017 3:26 PM  
**To:** Wendy Rickman  
**Subject:** Fwd: DHS workgroup

let's talk about this please

----- Forwarded message -----

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Subject: Re: DHS workgroup  
To: Jodi Tomlonovic <[jtomlonovic@fpcouncil.com](mailto:jtomlonovic@fpcouncil.com)>  
Cc: Wendy Rickman <[wrickma@dhs.state.ia.us](mailto:wrickma@dhs.state.ia.us)>, Julie Allison <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)>, "Denise.Wheeler@idph.iowa.gov" <[dwheeler@idph.state.ia.us](mailto:dwheeler@idph.state.ia.us)>

That's an excellent idea.

Debra J. Kane, PhD, RN, PHCNS-BC  
MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention  
Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319  
P: 515.281.4952 | F: 515.725.1760 | [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)

*Promoting and Improving the Health of Iowans*

On Tue, Nov 28, 2017 at 2:49 PM, Jodi Tomlonovic <[jtomlonovic@fpcouncil.com](mailto:jtomlonovic@fpcouncil.com)> wrote:

Hi Wendy & Julie

I apologize for thinking of this after you set up the Data Workgroup but Denise and I think we should include Pete Damiano from the University of Iowa in the Data Workgroup. As you know, Pete and his group conducted the evaluations of the IFPN for DHS's requirements to CMS.

I don't know if you think it is too late – but we believe he would have some good perspectives about the data and how to look at it.

Jodi

## Highland, Matt

---

**From:** Jodi Tomlonovic <jtomlonovic@fpcouncil.com>  
**Sent:** Tuesday, November 28, 2017 2:50 PM  
**To:** wrickma@dhs.state.ia.us; Julie Allison; Denise.Wheeler@idph.iowa.gov; Kane, Debbie  
**Subject:** DHS workgroup

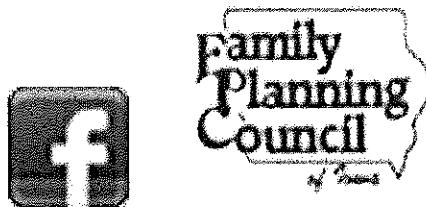
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Jodi

Jodi Tomlonovic  
Executive Director  
Family Planning Council of Iowa  
108 3rd Street, Suite 220  
Des Moines, IA 50309  
Phone: (515) 288-9028  
Fax: (515) 288-4048  
[jtomlonovic@fpcouncil.com](mailto:jtomlonovic@fpcouncil.com)  
[www.fpcouncil.com](http://www.fpcouncil.com)



**Notice to recipient:** This e-mail, including attachments, is the property of the Family Planning Council of Iowa, is covered by the Electronic Communications Privacy Act, 18 U.S.C. 2510-2521, is confidential, and may contain privileged information. If you are not the intended recipient or a person responsible for delivering this message to an intended recipient, you are hereby notified that any retention, dissemination, distribution, or copying of this communication is strictly prohibited and may be a violation of law. If you are not the intended recipient, please reply back to the sender at the Family Planning Council of Iowa that you have received this e-mail message in error, then delete it, including any attachments. Thank you.

## **Highland, Matt**

---

**From:** Highland, Matt <mhighla@dhs.state.ia.us>  
**Sent:** Tuesday, November 28, 2017 8:49 AM  
**To:** Wheeler, Denise  
**Cc:** Kane, Debbie; Deborah Johnson; Julie A. Allison; Matt Briggs; Wendy Rickman  
**Subject:** Re: Revised DRAFT FFP Report with data dictionary - response requested by Noon on Wednesday, November 29

On page 15, last graph is says IFPH, should probably be IFPN.

*Thank You,*  
**Matt Highland**  
Interim Public Information Officer,  
Department of Human Services  
Communications Specialist,  
Iowa Medicaid Enterprise  
515-281-4848 office  
515-559-7326 cell  
[mhighla@dhs.state.ia.us](mailto:mhighla@dhs.state.ia.us)



On Fri, Nov 17, 2017 at 12:55 PM, Wheeler, Denise <[denise.wheeler@idph.iowa.gov](mailto:denise.wheeler@idph.iowa.gov)> wrote:  
Oops, I also took a shot at filling in the "list of services" in the data dictionary from the color coded list of covered services. I tried to use summary examples rather than specific codes or names when possible.

I am still a bit baffled by what to place in "selected services" though.

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*Protecting and Improving the Health of Iowans*

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A few comments.

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*Protecting and Improving the Health of Iowans*

On Thu, Nov 16, 2017 at 10:32 AM, Kane, Debbie <[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)> wrote:

Good day,

Attached is a revised FFP Report that includes the data dictionary (at the end of the document). In order to be prepared for the December 1st meeting, I ask you to submit your edits to me by noon on Wednesday, November 29th.

On another note, please watch your email for a doodle poll. Per our discussion at yesterday's meeting, the data group will need to meet in December - we will probably need 2 meetings.

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Debbie

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*Promoting and Improving the Health of Iowans*

## **Highland, Matt**

---

**From:** Allison, Julie A. <jalliso1@dhs.state.ia.us>  
**Sent:** Tuesday, November 28, 2017 8:45 AM  
**To:** Kane, Debbie; Matt Briggs; Davis, Rebecca [DHS]; Lindsay, Kelly  
**Cc:** Deborah Johnson; Denise Wheeler; George Signs; Jennifer Warren-Ulrick; Matt Highland; Merea Bentrott; Wendy Rickman; Jodi Tomlonovic; Martin Cannon; Kim Laube; Julie Lovelady; Brenda L. Freshour-Johnston  
**Subject:** Re: Revised DRAFT FFP Report with data dictionary - response requested by Noon on Wednesday, November 29  
**Attachments:** FFP Report 2017 v6.docx

Good morning,

Attached is the updated draft of the FPP report. Please utilize this as a resource for data needed. NOTE: Data dictionary not included as waiting for final.

Please send data to Brenda, [bfresho@dhs.state.ia.us](mailto:bfresho@dhs.state.ia.us) and cc Julie Allison

Please submit in the following format:

- In the body of the email put the name of the chart, slide page number(s); SFY quarter identifiable and the data point
- If you are submitting more than one slide, data point, it is acceptable to send an excel formatted sheet with tabs for each chart. Please make sure you, again, identify the chart, slide page number and SFY quarter.

We would like to receive the data by EOD 12/11/17. Let me know if this is not going to be realistic but the goal is to have a majority of the data loaded into the report for review on 12/15/17.

Thanks,  
Julie

On Thu, Nov 16, 2017 at 4:14 PM, Allison, Julie A. <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)> wrote:

Hi All,

Just a quick note and "heads up". I will be sending the next draft version of the FPP report on 11/27 and will be requesting (CORE/IME, ACFS, IDPH) first quarter data and SFY17 verification if provided or provide SFY17. Would like to have the data by 12/11 so that we can drop it into the FPP report and review on 12/15 (Oversight). I will send the format for data submission on the 27th.

Hope you have a great Thanksgiving!  
Julie

On Thu, Nov 16, 2017 at 10:32 AM, Kane, Debbie <[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)> wrote:

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Julie Allison, MPA

Child Care Bureau Chief

Iowa Department of Human Services/Division of Adult, Children and Family Services

1305 East Walnut, Hoover State Office Bldg., 5<sup>th</sup> floor, Des Moines, Ia. 50319-0114

Phone: 1-515-281-6177

Fax: 515-281-6248

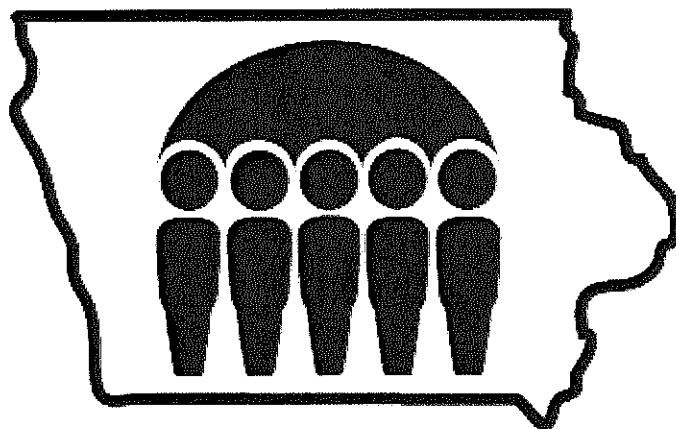
--

Julie Allison, MPA

Child Care Bureau Chief

Iowa Department of Human Services/Division of Adult, Children and Family Services

# Iowa Department of Human Services



## ***Family Planning Program***

*Previously Iowa Family Planning Waiver*

**January 2018**

## Report Summary: Family Planning Program

### Background

The Family Planning Program (FPP) is for men and women who are 12-54 years of age. The FPP helps with the cost of family planning related services. The FPP is a state-funded DHS program which replaced the Iowa Family Planning Network (IFPN) program. Eligibility and covered benefits did not change. The location where members receive services may have changed. As of July 1, 2017, eligible IFPN members transitioned to the FPP. This program allows men and women to get family planning services only. This program is a form of limited benefit coverage. It does not meet the Affordable Care Act requirements for a minimum essential benefits plan.

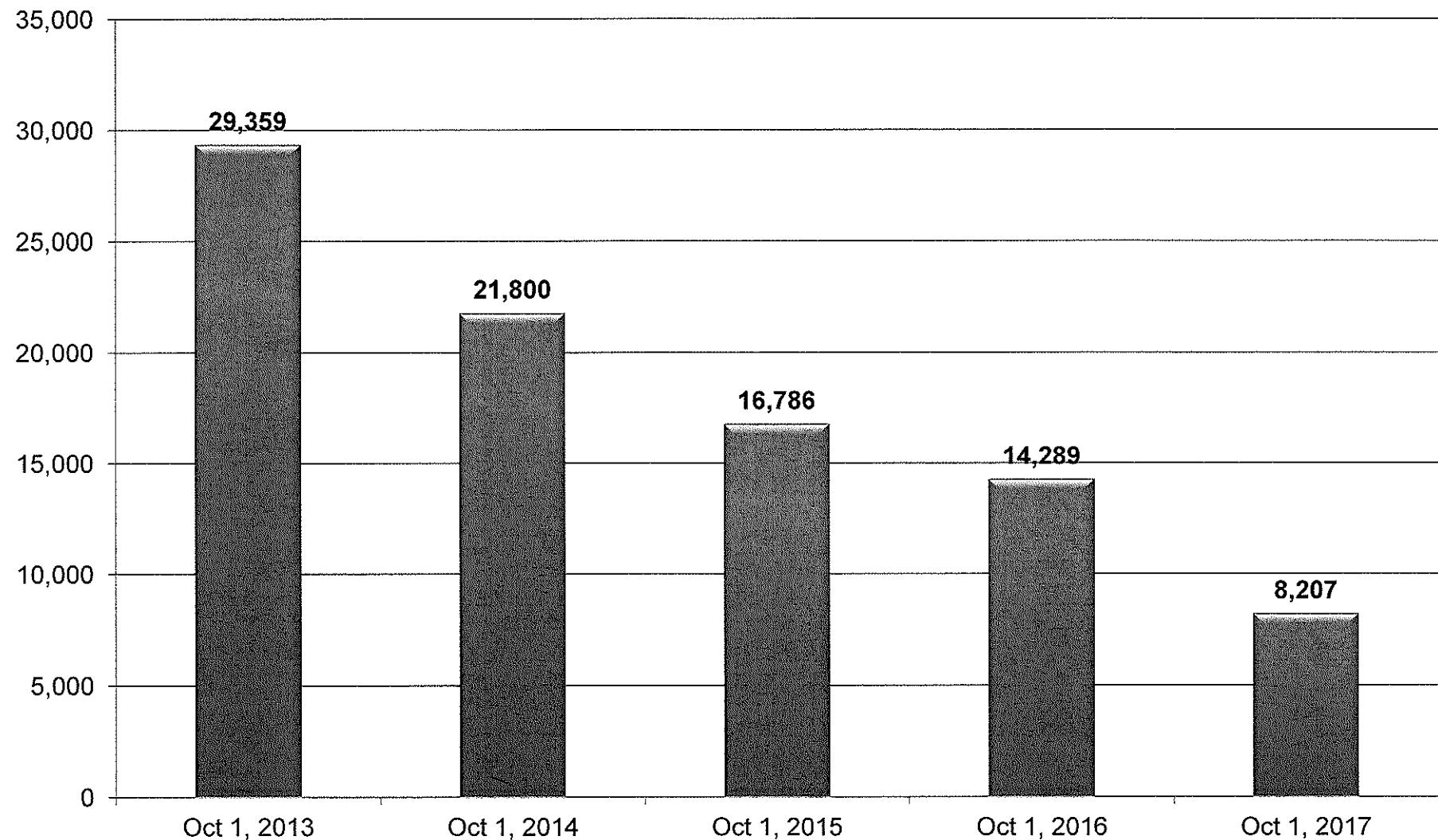
### Data Limitations/Considerations

The FPP and IFPN are programs with limited benefits and declining enrollment due to increased health care coverage, as FPP and IFPN do not meet the Affordable Care Act (ACA) definition of 'minimal essential coverage.'

It is important to note that data are collected from a variety of systems, including eligibility and claims systems. With the recent transition to managed care and the transition from IFPN to the FPP, data may not have been collected in the exact same way, due to differences in claims processing, etc. A work group was assembled to ensure we are accounting for these changes and how they impact the data. The data workgroup developed a data dictionary for the data elements reported in this document. It is located [here](#).

### Data Caveat Statement

## Figure X: Number of Enrolled Members

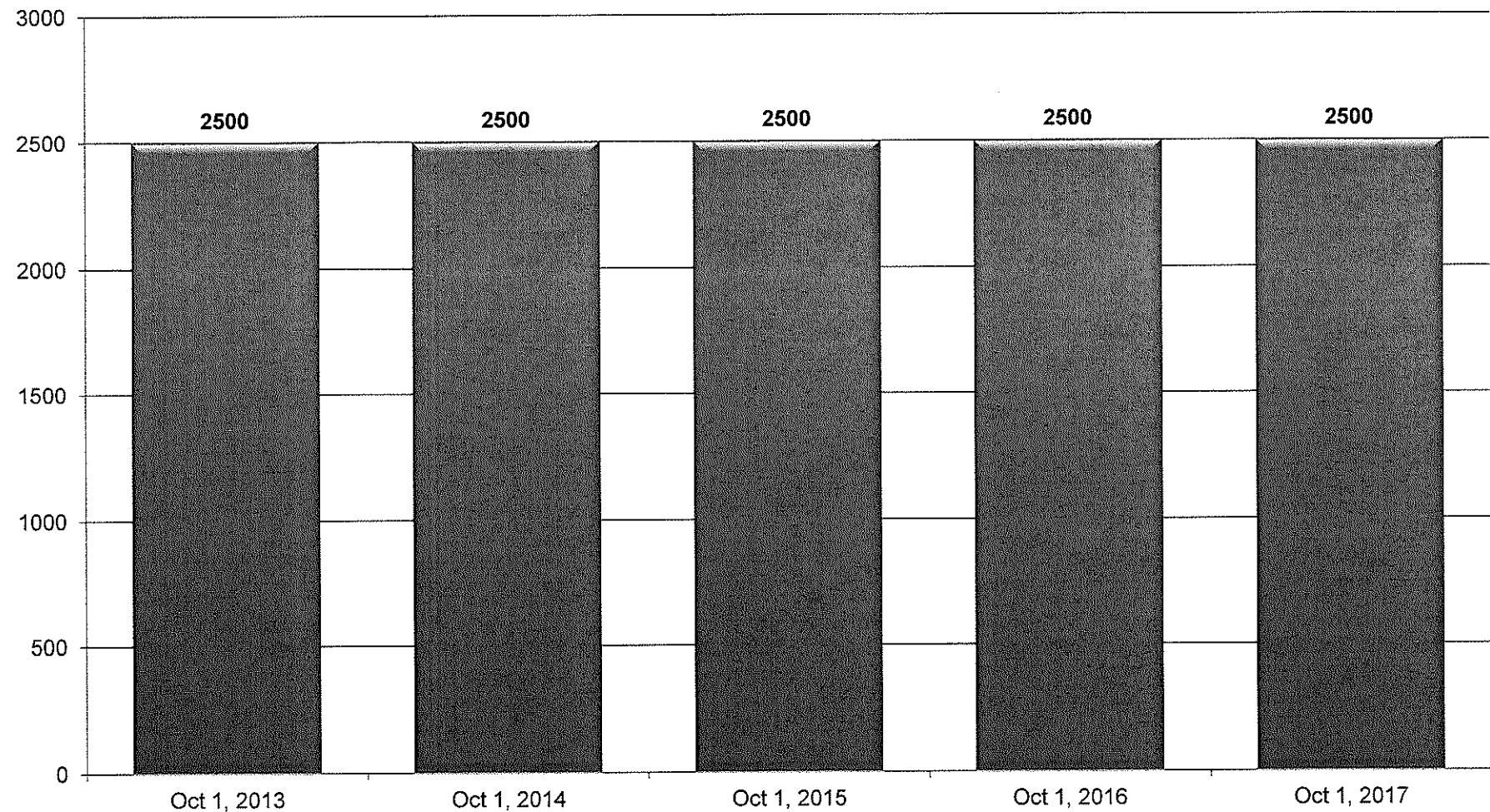


*Unduplicated Enrolled Members' Numbers*

*Data Source: Monthly Medicaid Eligibility Report Mars Report IAMM3700-R001, R002, R003 from MMIS*

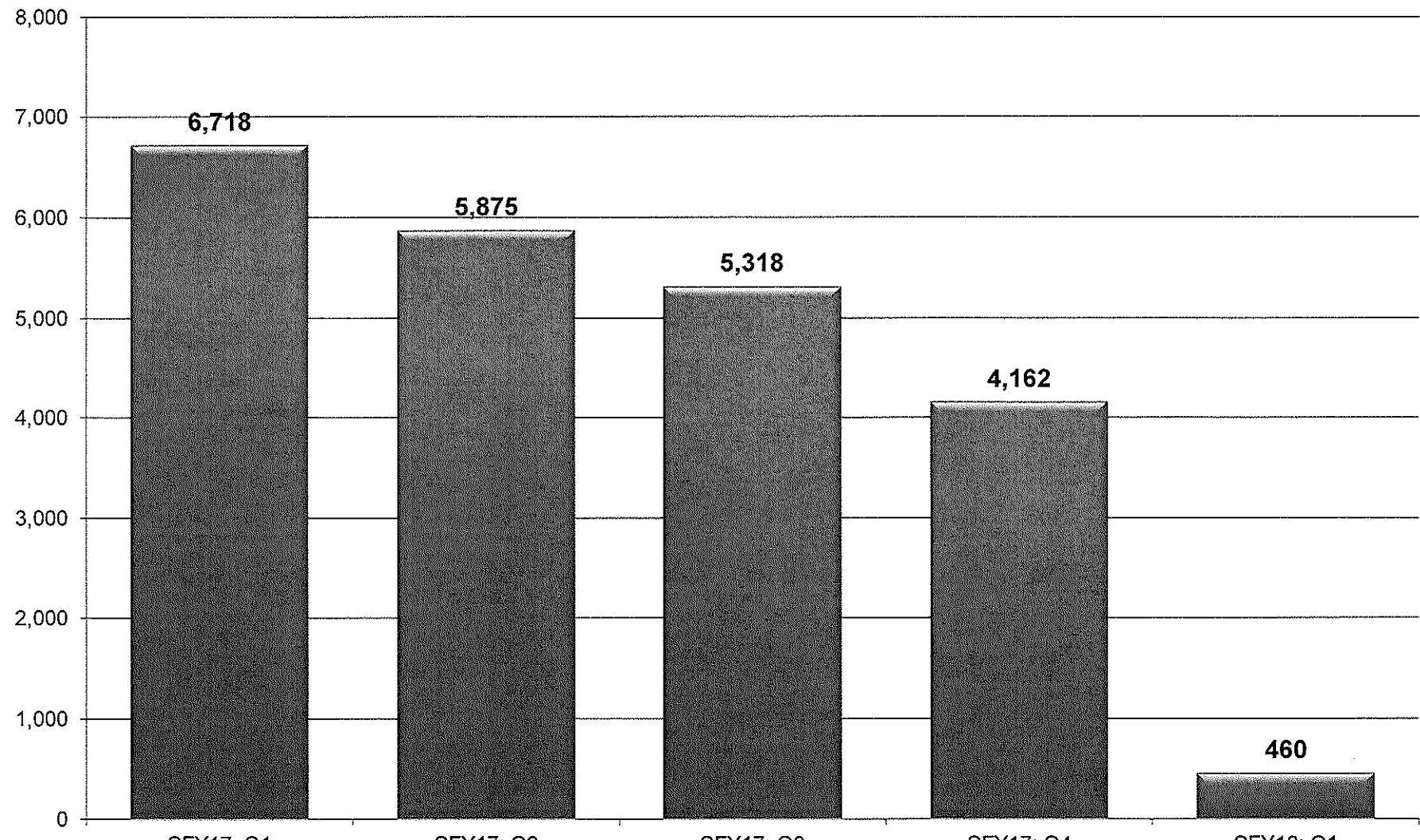
*The FPP and IFPN are programs with limited benefits and declining enrollment due to increased health care coverage, as FPP and IFPN do not meet the Affordable Care Act (ACA) definition of 'minimal essential coverage.'*

## Figure X: Confidential Enrolled FFP Members



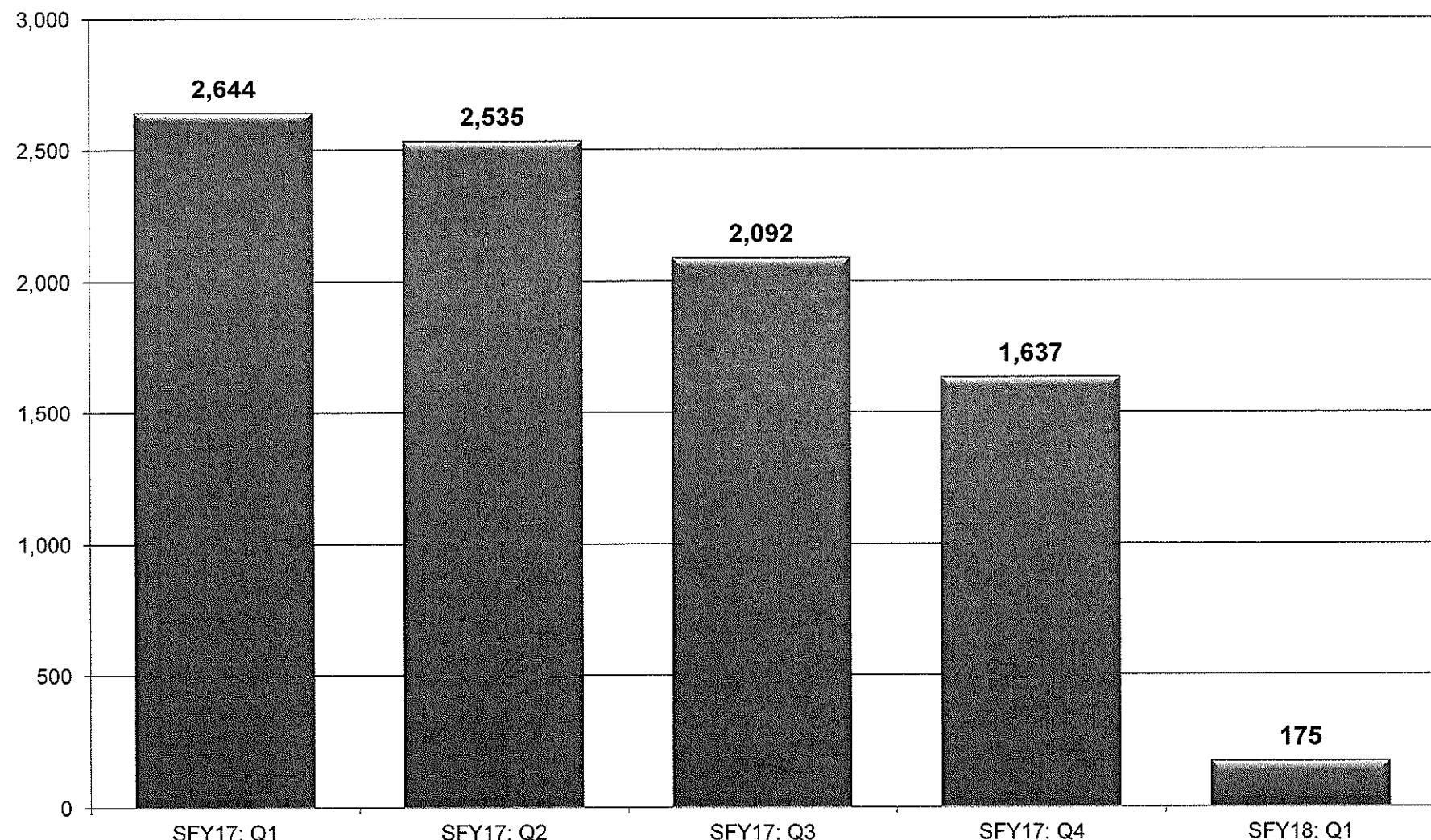
*Duplicated Enrolled Members' Numbers (may include members enrolled in Medicaid due to a pregnancy ending)*

## Figure X: Services Accessed by Members



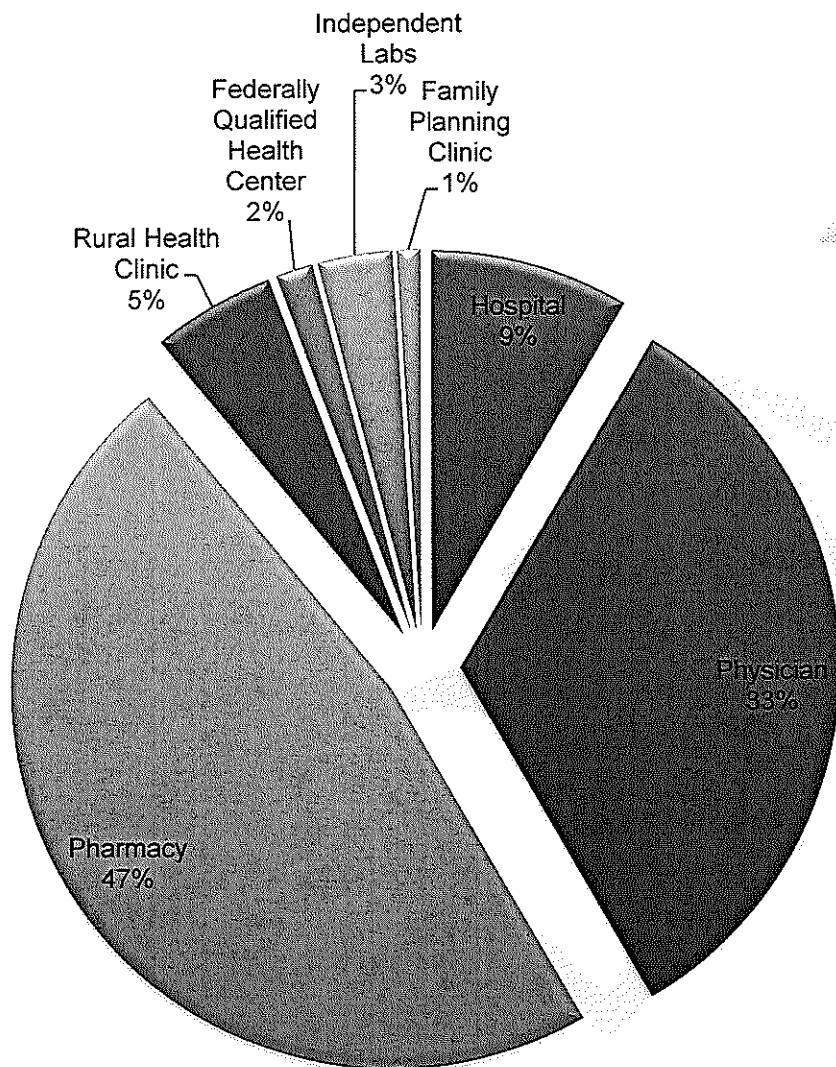
*Data Source: Core Ad Hoc Report/Query*

## Figure X: Unique Provider Count



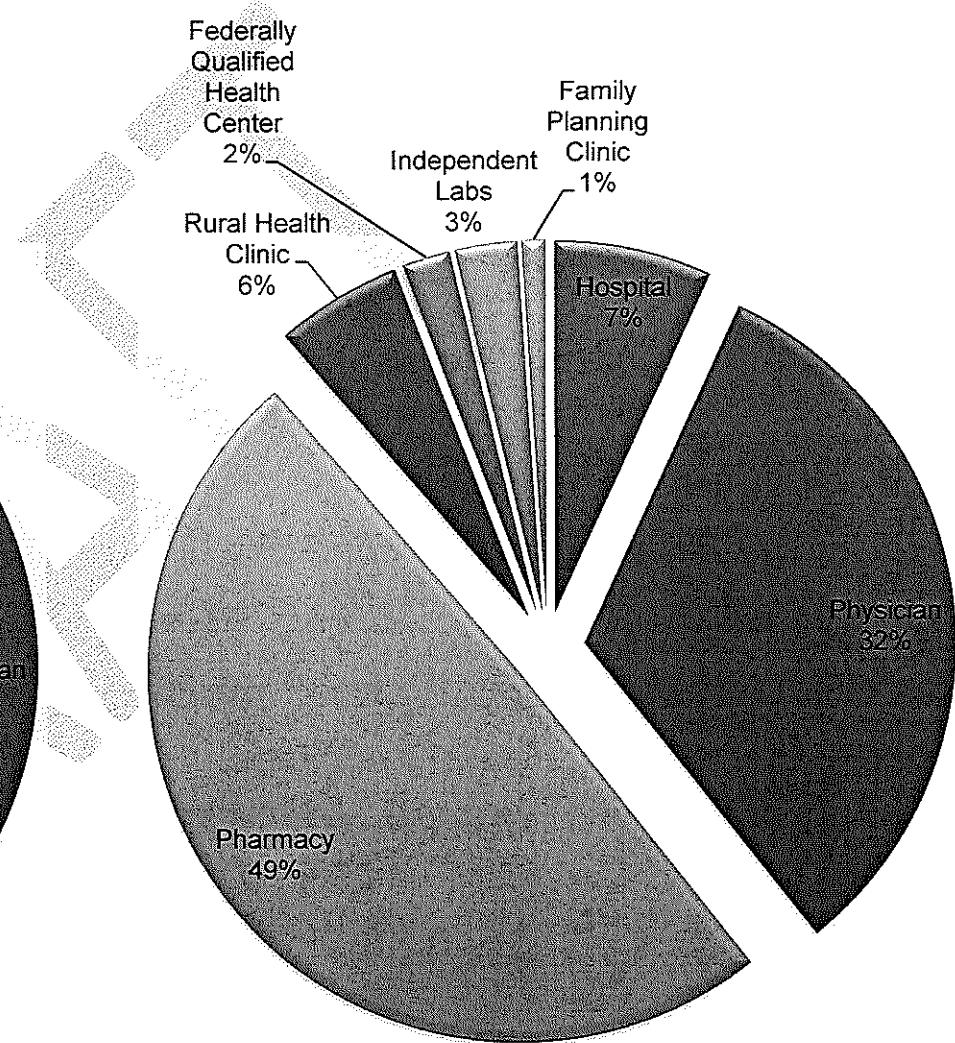
Data Source: Core Ad Hoc Report/Query

**Figure X: Provider Participation SFY17: Q2**



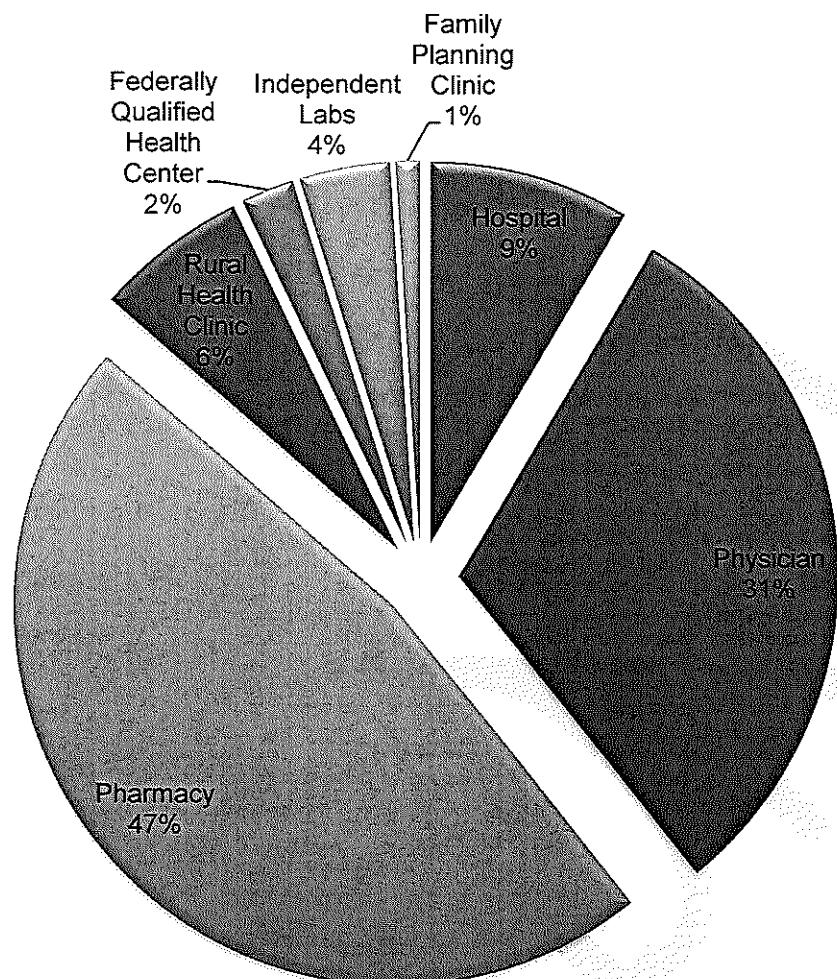
*Data Source: DDM*

**Figure X: Provider Participation SFY17: Q3**

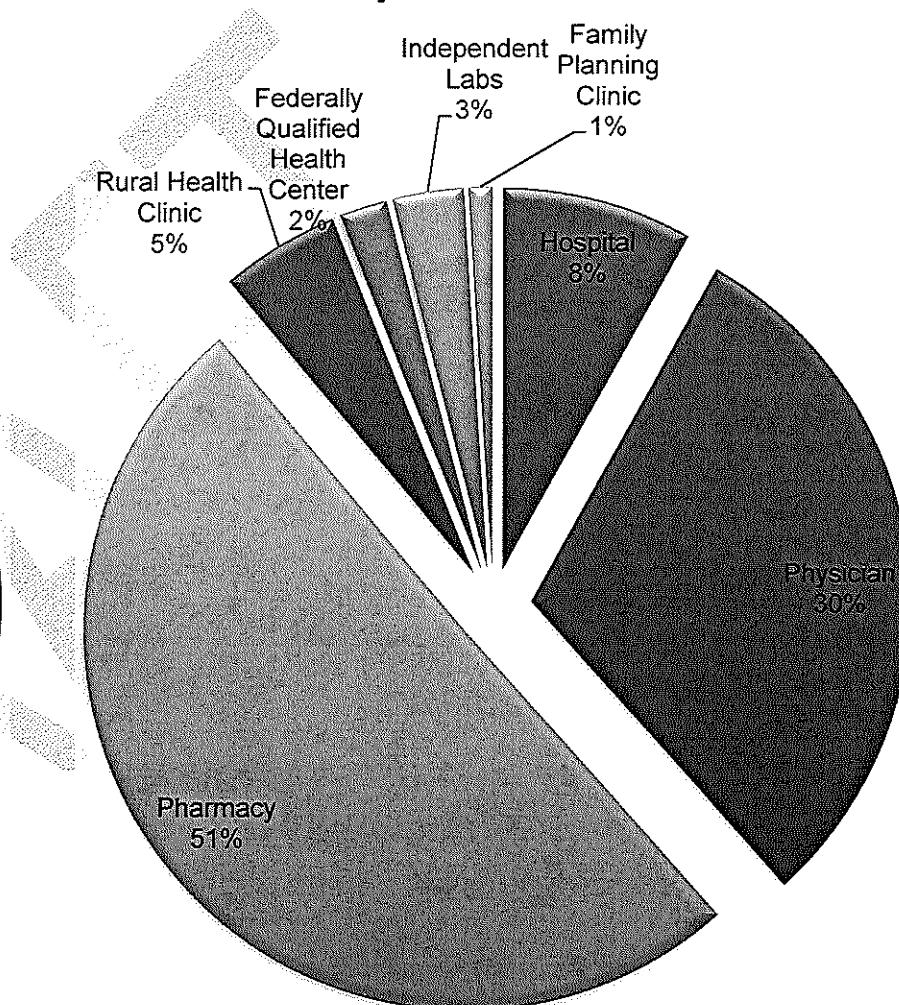


*Data Source: DDM*

**Figure X: Provider Participation SFY17: Q4**



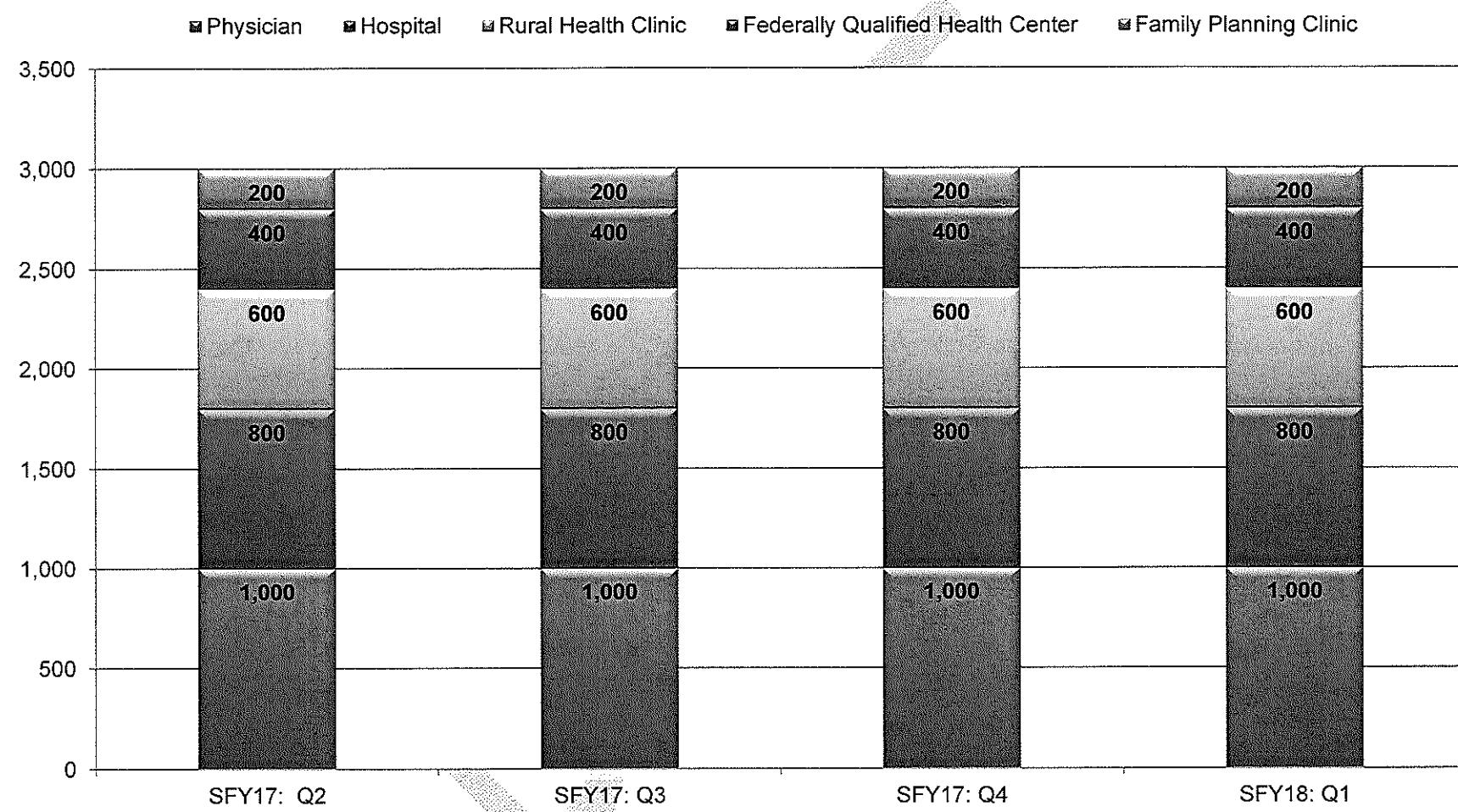
**Figure X: Provider Participation SFY18: Q1**



*Data Source: DDM*

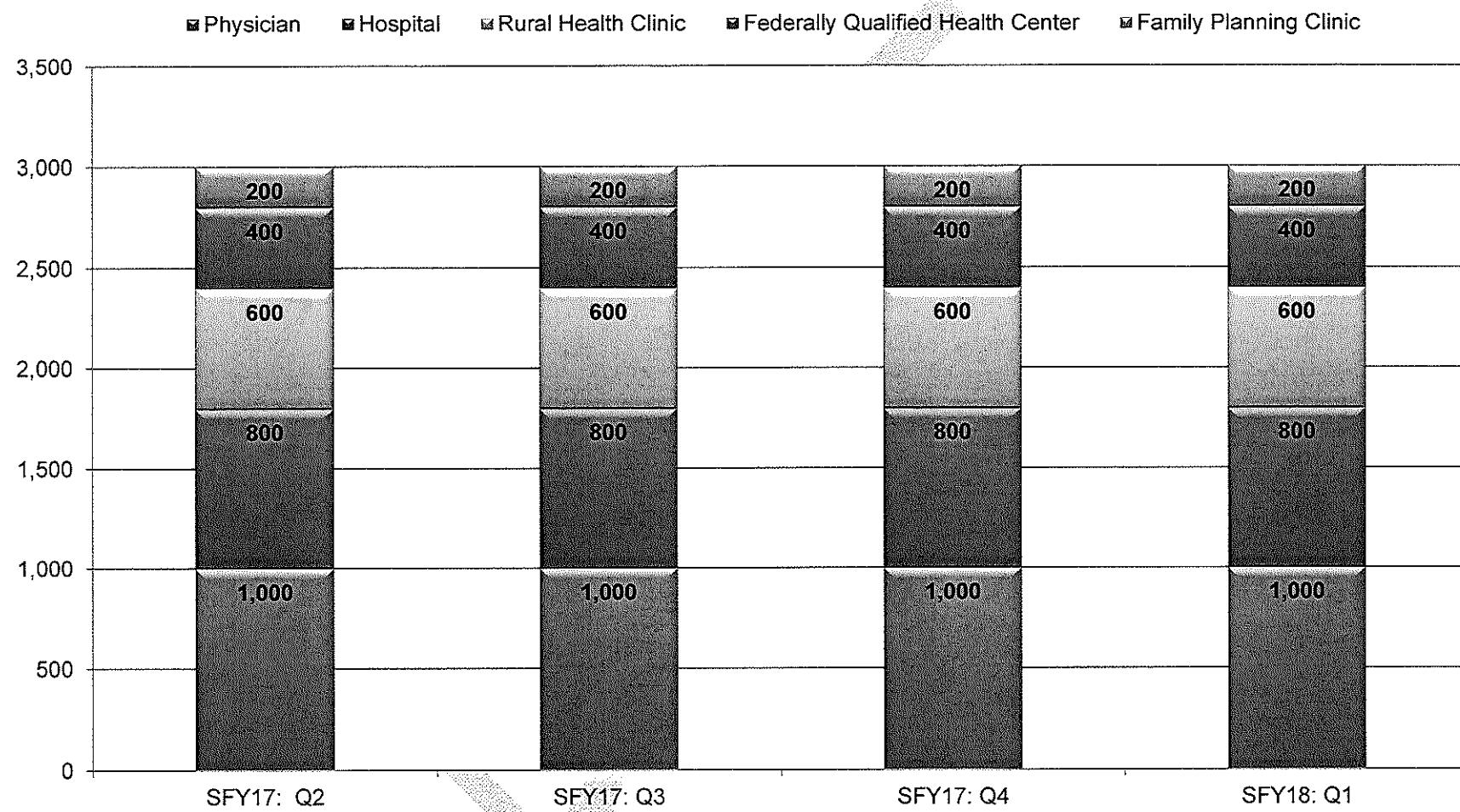
*Data Source: DDM*

## Figure X: Provider Participation Public Health Region 1 - Central Iowa



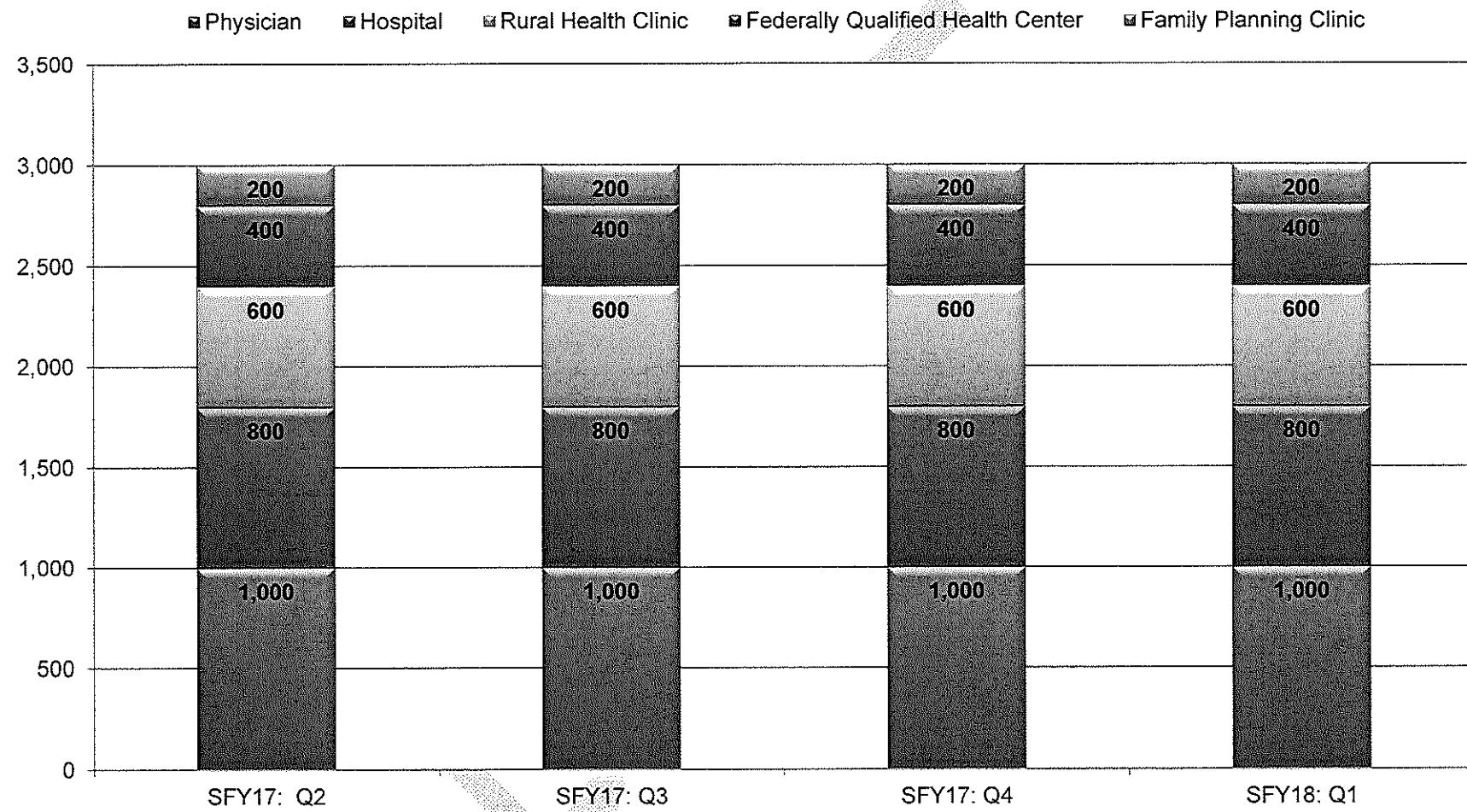
Data Source: Core Ad Hoc Report/Query

## Figure X: Provider Participation Public Health Region 2 - North Iowa



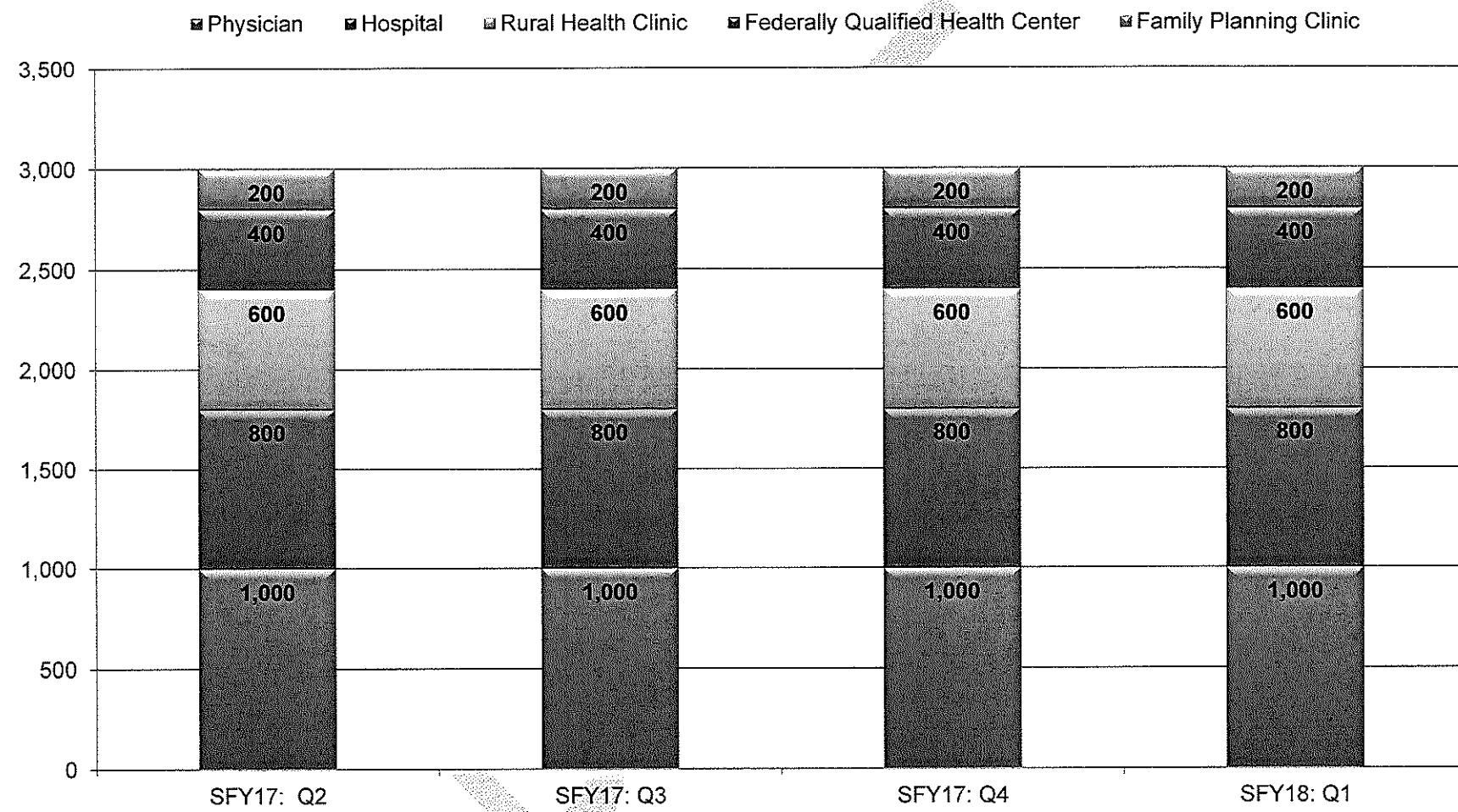
Data Source: Core Ad Hoc Report/Query

## Figure X: Provider Participation Public Health Region 3 - Northwest Iowa



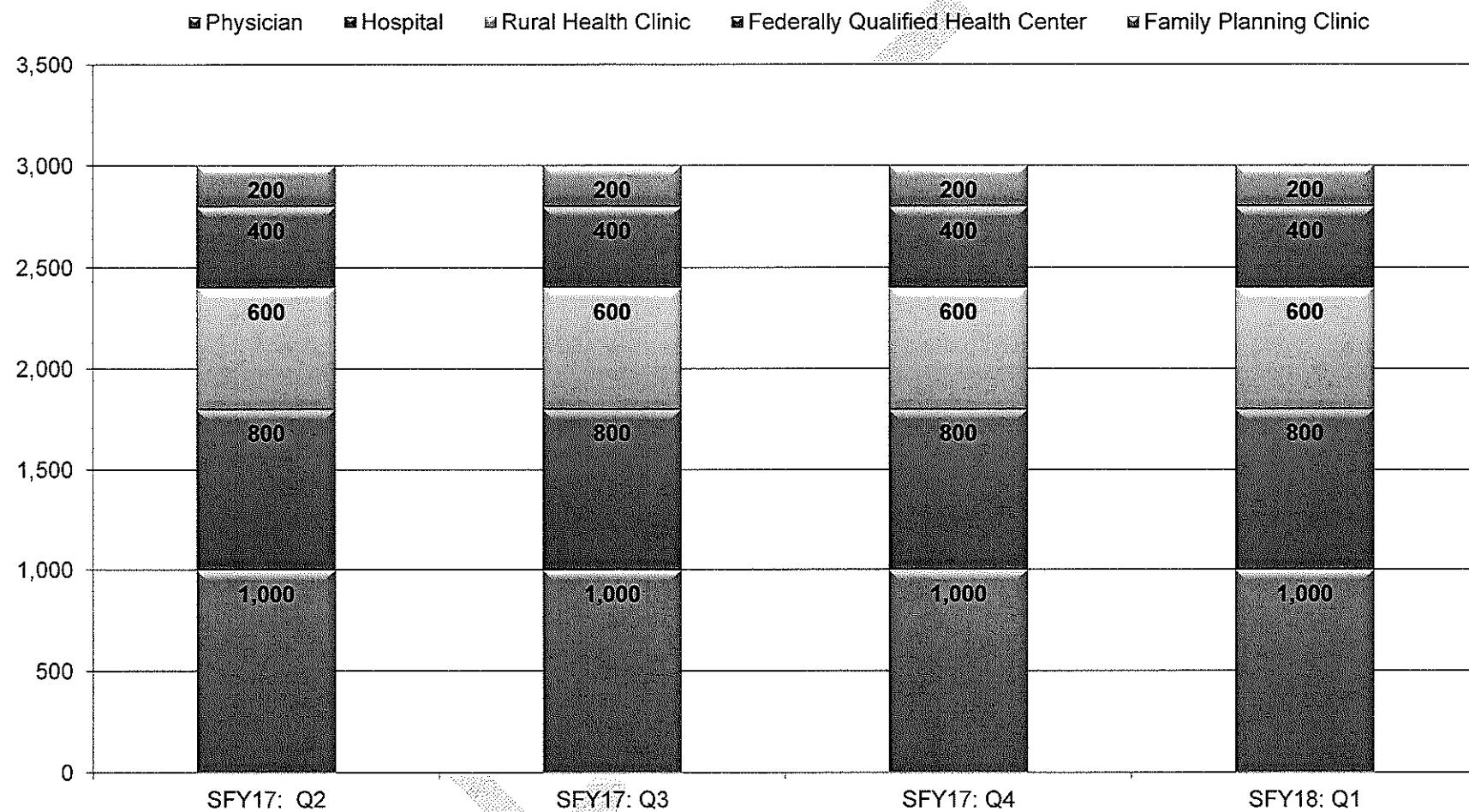
Data Source: Core Ad Hoc Report/Query

## Figure X: Provider Participation Public Health Region 4 - Southwest Iowa



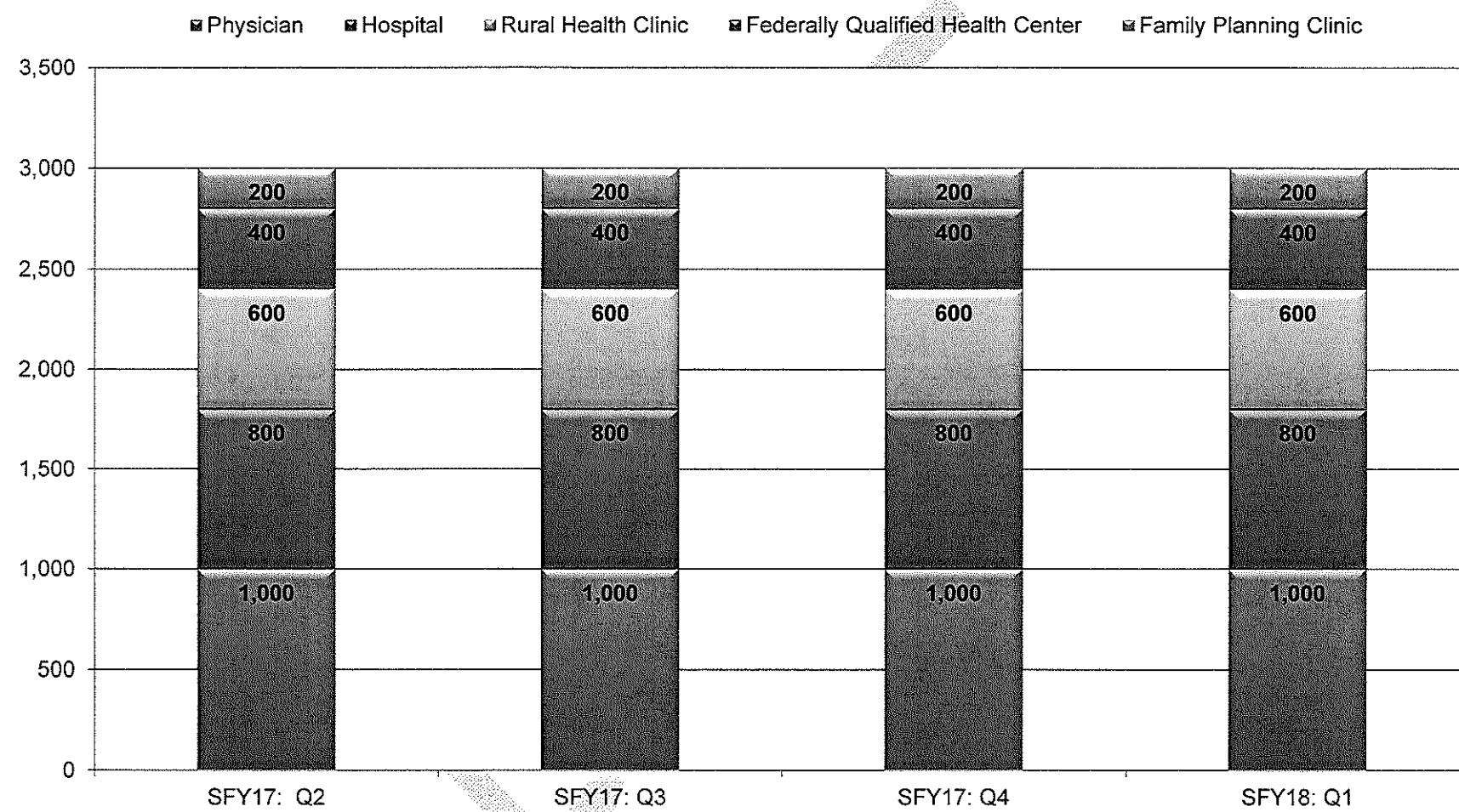
Data Source: Core Ad Hoc Report/Query

## Figure X: Provider Participation Public Health Region 5 - Southeast Iowa



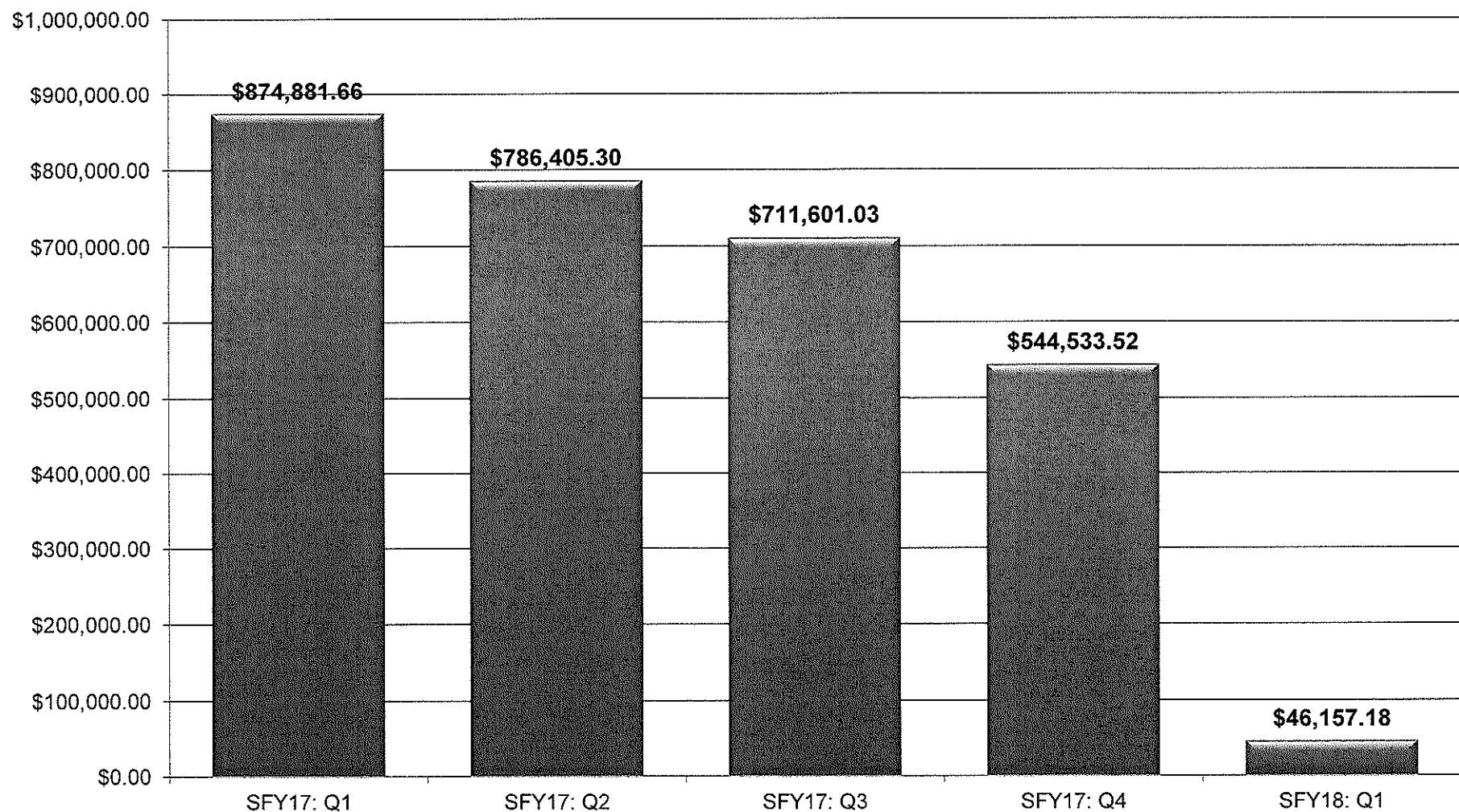
Data Source: Core Ad Hoc Report/Query

## Figure X: Provider Participation Public Health Region 6 - East Central Iowa



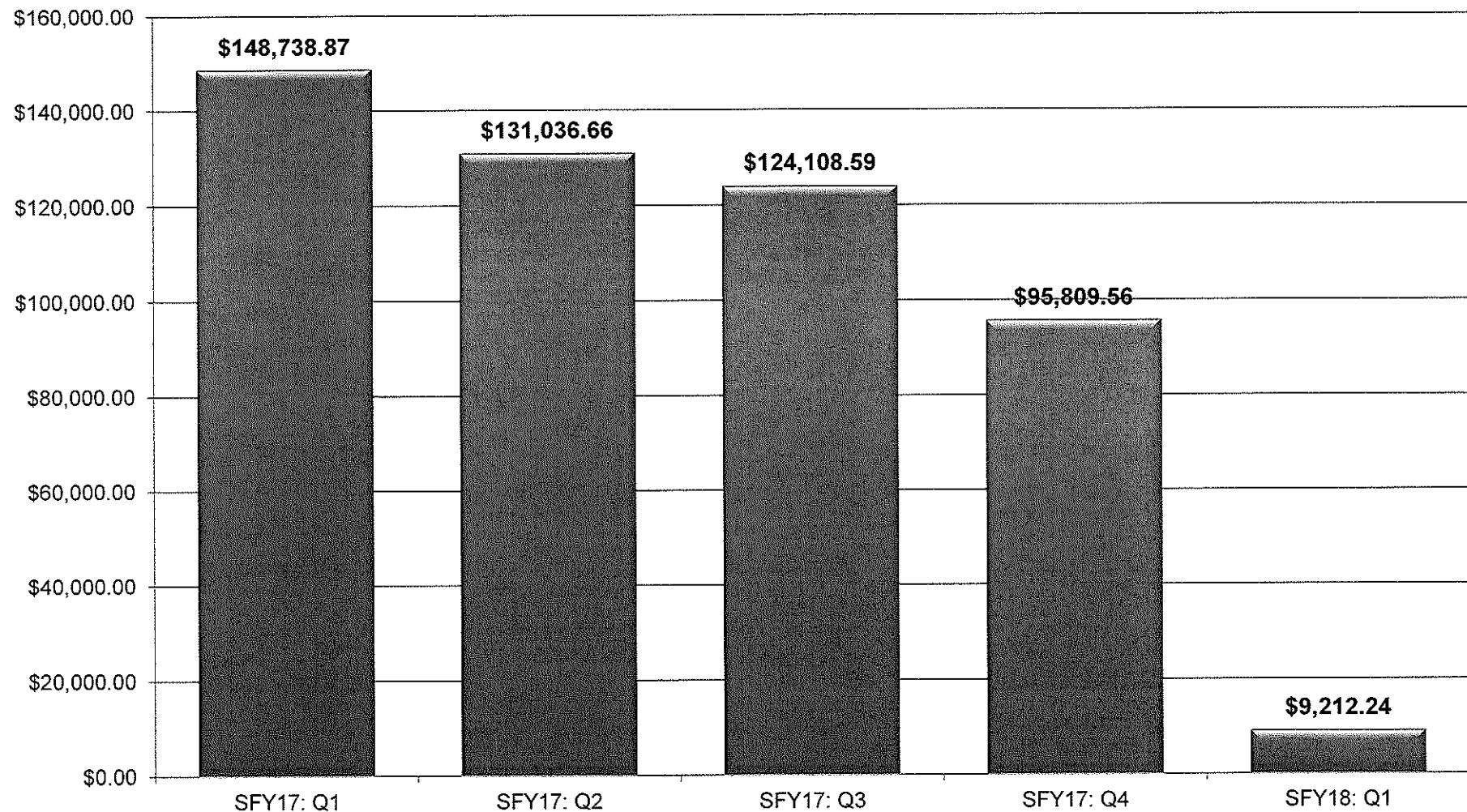
Data Source: Core Ad Hoc Report/Query

## Figure X: Reimbursement for Services



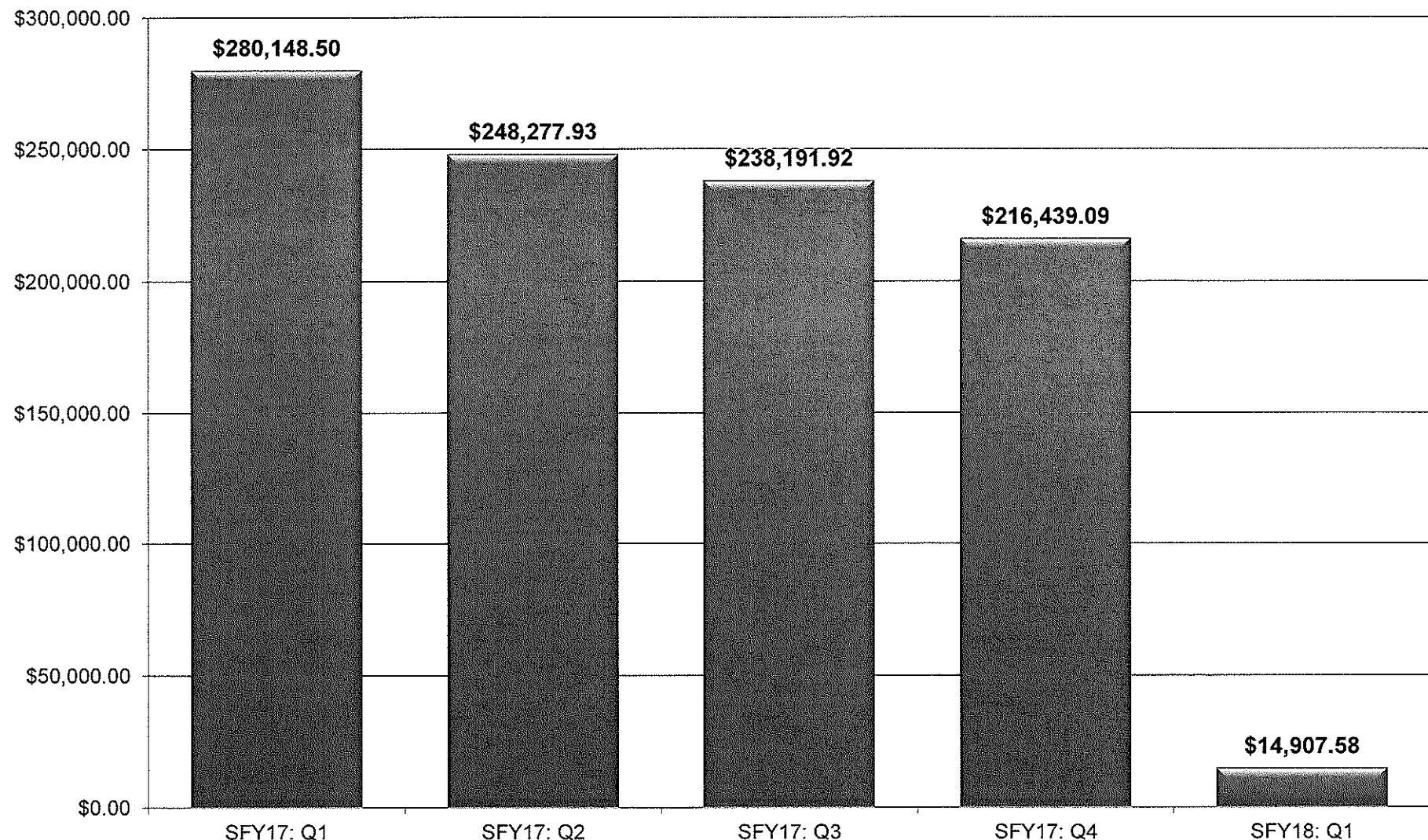
*Data Source: Core Ad Hoc Report/Query*

## Figure X: Payments for Office Visits



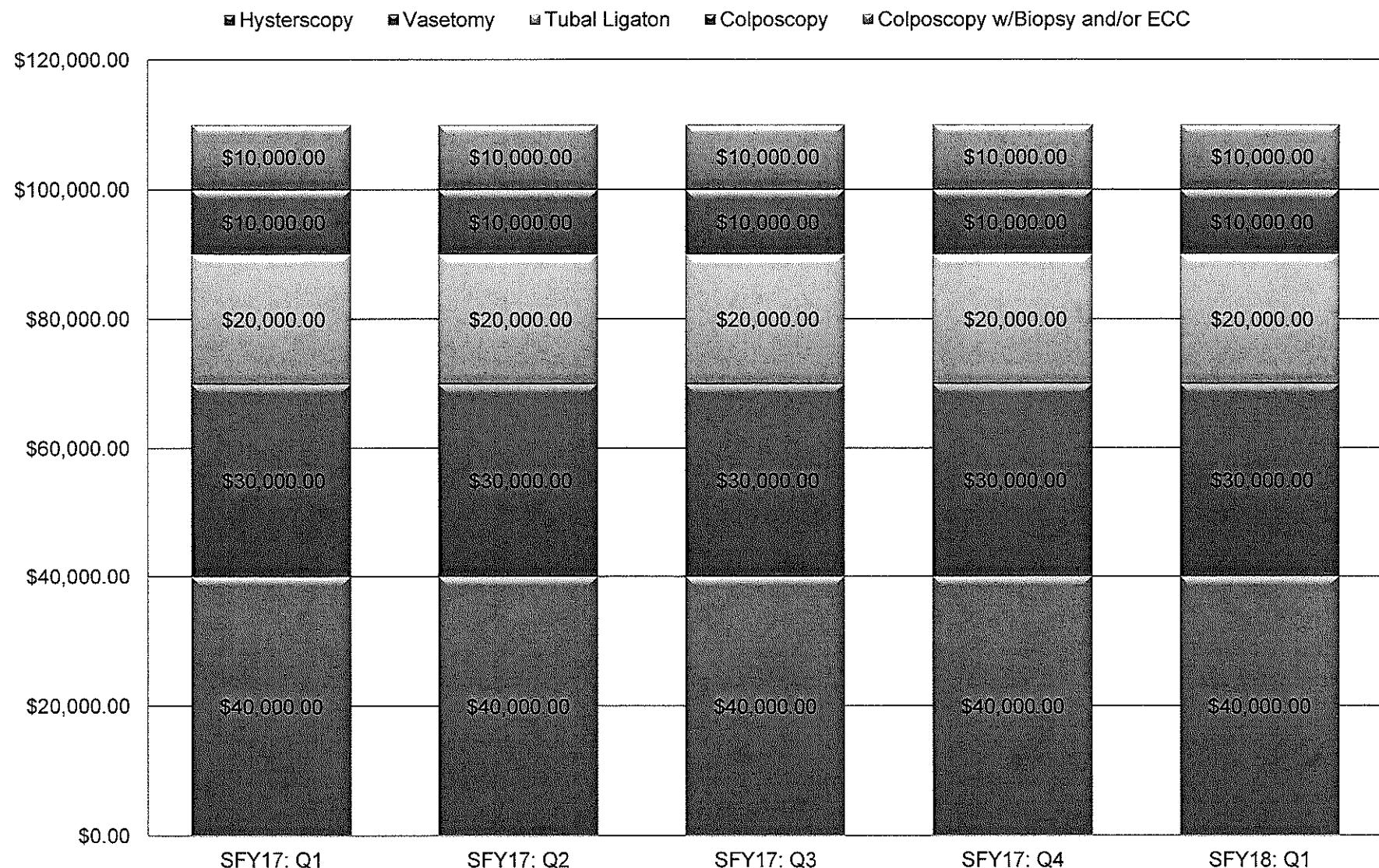
*Data Source: Core Ad Hoc Report/Query*

## Figure X: Payments for Contraceptive Services



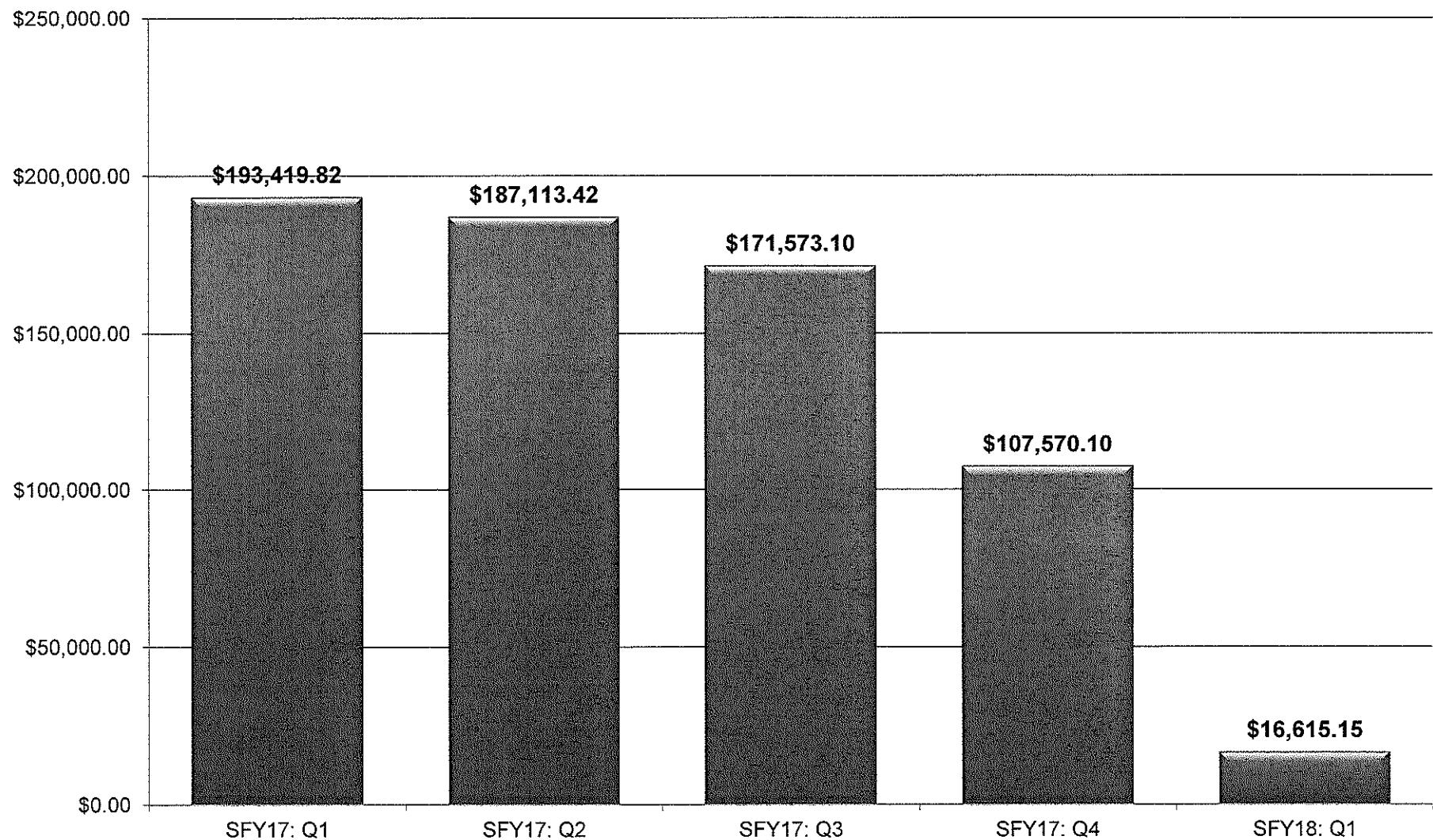
Data Source: Core Ad Hoc Report/Query

## Figure X: Payments for Selective Services



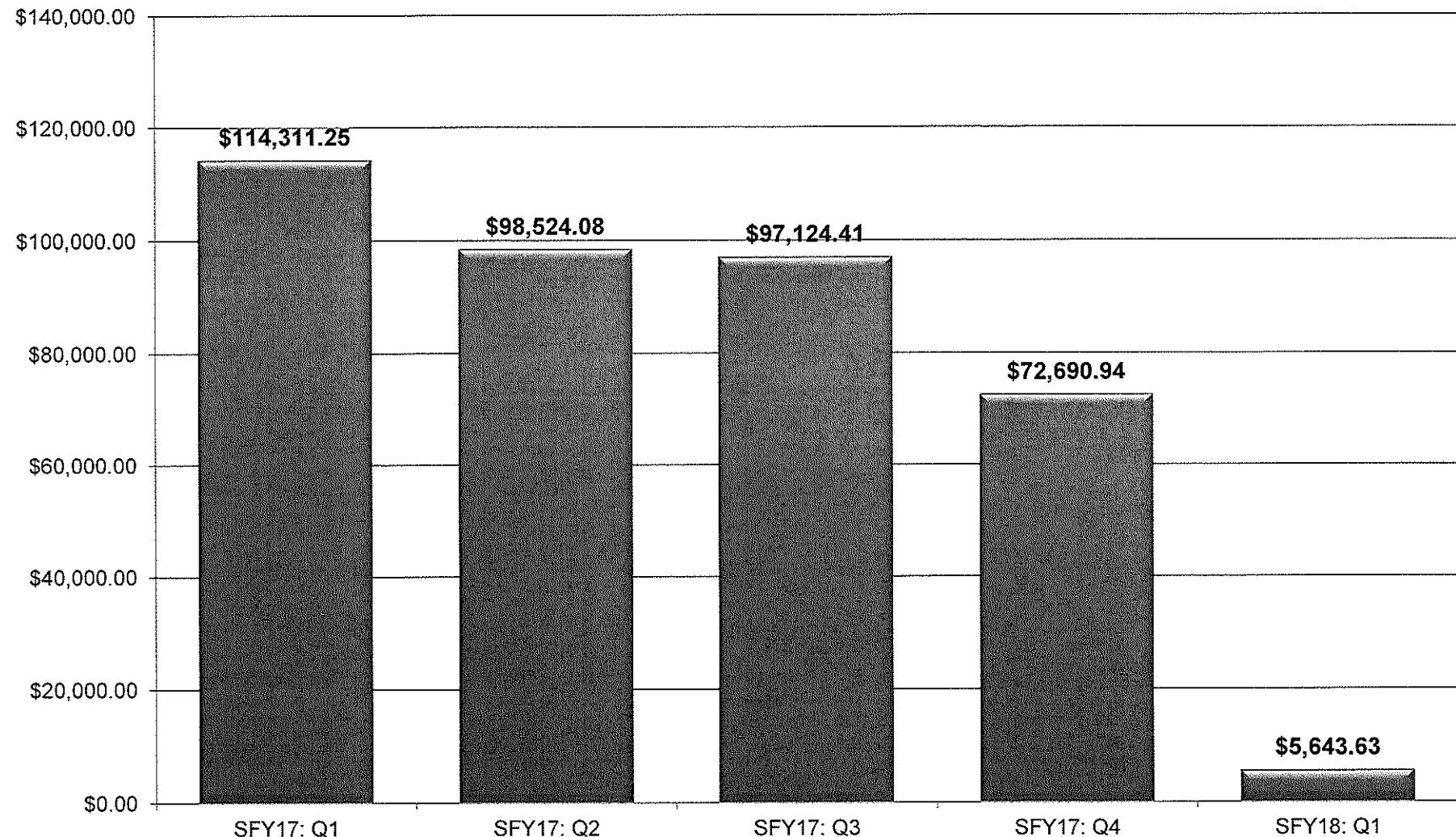
Data Source: Core Ad Hoc Report/Query

## Figure X: Pharmacy Payments



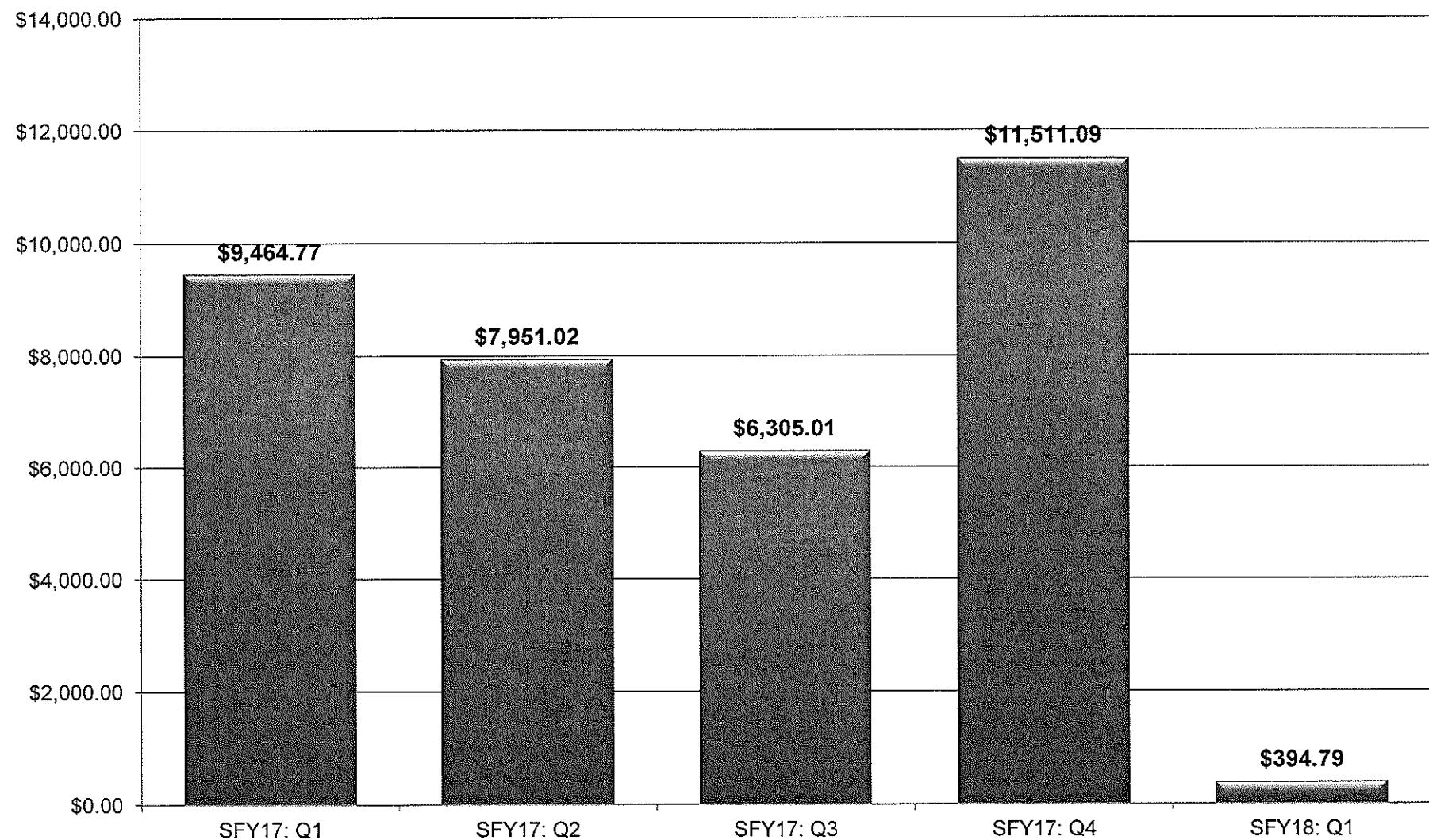
*Data Source: Core Ad Hoc Report/Query*

## Figure X: Payments for Labs and X-rays



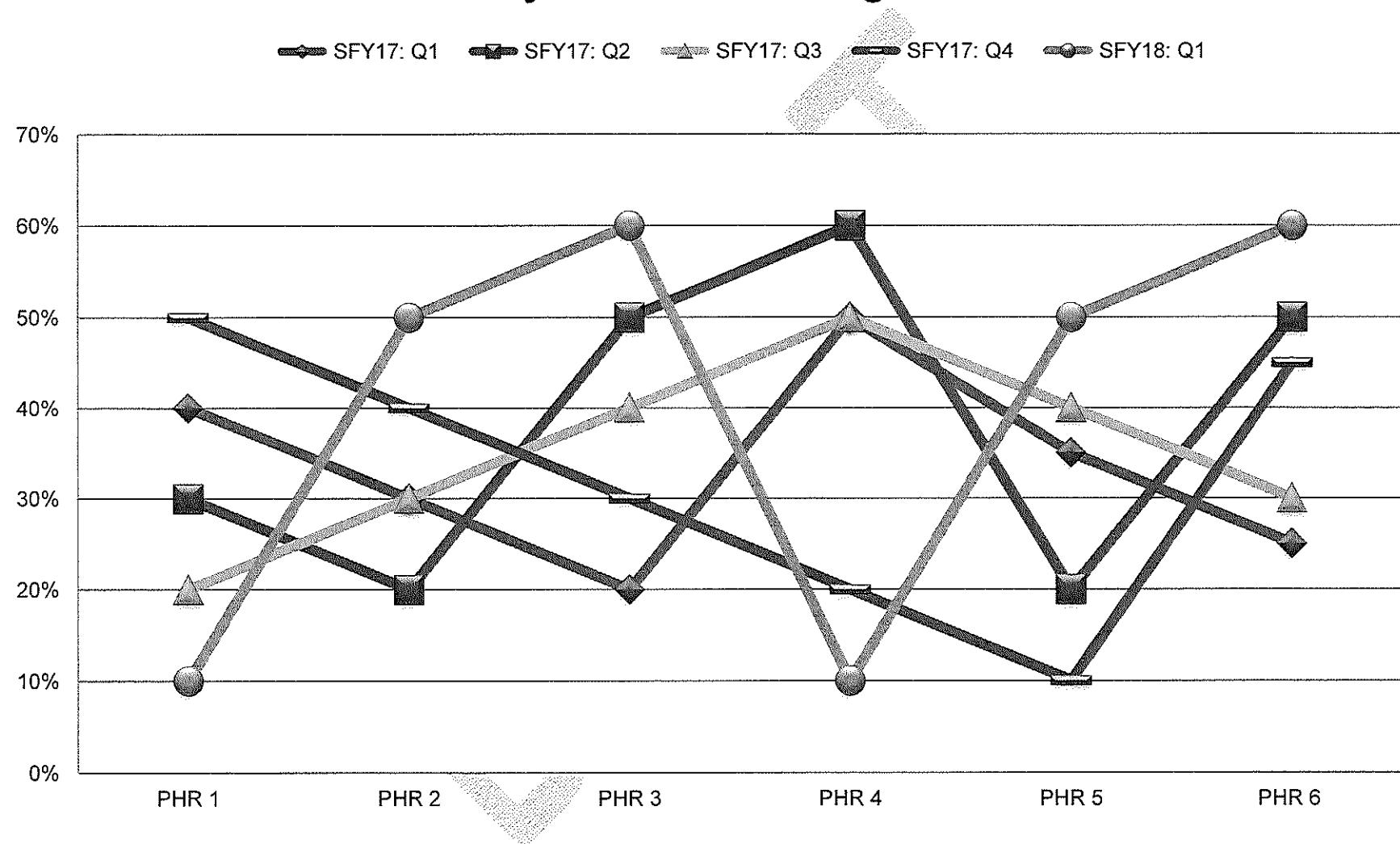
*Data Source: Core Ad Hoc Report/Query*

## Figure X: Payments for Surgical Services



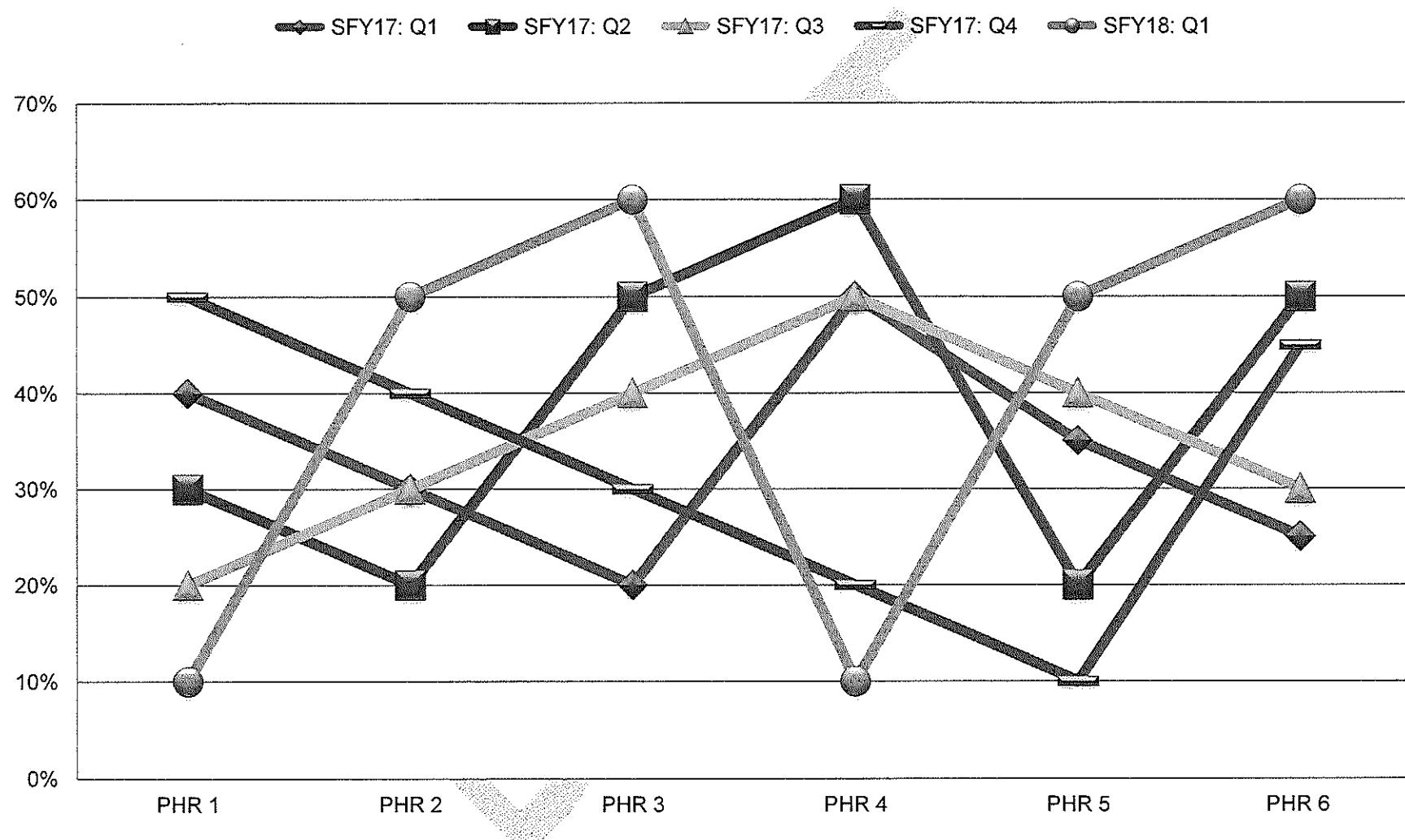
*Data Source: Core Ad Hoc Report/Query*

## Figure X: Most/Moderate Contraceptive by Public Health Region



Data Source: Core Ad Hoc Report/Query

## Figure X: LARCS by Public Health Region



Data Source: Core Ad Hoc Report/Query

## Data Dictionary



## Highland, Matt

---

**From:** Allison, Julie A. <jalliso1@dhs.state.ia.us>  
**Sent:** Tuesday, November 28, 2017 8:28 AM  
**To:** Wendy Rickman  
**Subject:** Fwd: S18-0355

FYI, Kelly states she has not heard from anyone.

----- Forwarded message -----

From: **Lovelady, Julie** <[jlovela@dhs.state.ia.us](mailto:jlovela@dhs.state.ia.us)>  
Date: Tue, Nov 28, 2017 at 7:14 AM  
Subject: Re: S18-0355  
To: "Allison, Julie A." <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)>  
Cc: "Johnson, Deborah" <[djohnso6@dhs.state.ia.us](mailto:djohnso6@dhs.state.ia.us)>

Good Morning Julie,

I will follow-up on this RFI this morning.

Thanks,

Julie

On Mon, Nov 27, 2017 at 12:45 PM, Allison, Julie A. <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)> wrote:  
Hi there,

Wendy wanted me to check in with you to see if we were on pace for completion of this RFI. It is due 11/29, from Joshua Bronsink, Senate Republican Caucus Staff regarding who has received funds as a Family Planning Program Provider in lieu of the federal funding.

Thanks,  
Julie

--

Julie Allison, MPA

Child Care Bureau Chief

Iowa Department of Human Services/Division of Adult, Children and Family Services

1305 East Walnut, Hoover State Office Bldg., 5<sup>th</sup> floor, Des Moines, Ia. 50319-0114

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--  
**Julie Lovelady**  
Deputy Medicaid Director  
Iowa Medicaid Enterprise  
515-256-4644 office  
515-782-6163 cell

[jlovela@dhs.state.ia.us](mailto:jlovela@dhs.state.ia.us)



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**From:** Wheeler, Denise <denise.wheeler@idph.iowa.gov>  
**Sent:** Friday, November 17, 2017 12:55 PM  
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**Subject:** Re: Revised DRAFT FFP Report with data dictionary - response requested by Noon on Wednesday, November 29  
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**To:** Kane, Debbie  
**Cc:** Deborah Johnson; Julie A. Allison; Matt Briggs; Matt Highland; Wendy Rickman  
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**Attachments:** FFP Report 2017 v5.docx

A few comments.

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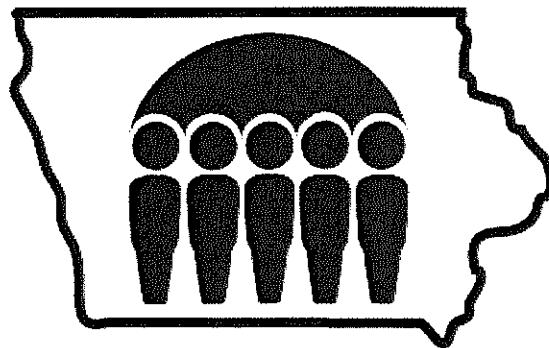
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MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319  
P: 515.281.4952 | F: 515.725.1760 | [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)

*Promoting and Improving the Health of Iowans*

# Iowa Department of Human Services



## ***Family Planning Program***

*Previously Iowa Family Planning Waiver*

October 2017

## Report Summary: Family Planning Program

### Background

The Family Planning Program (FPP) is for men and women who are 12-54 years of age. The FPP helps with the cost of family planning related services. The FPP is a state-funded DHS program, which replaced the Iowa Family Planning Network (IFPN) program. Eligibility and covered benefits did not change. The location where members receive services may have changed. As of July 1, 2017, eligible IFPN members transitioned to the FPP. This program allows men and women to get family planning services only. This program is a form of limited ~~insurance~~ coverage. It does not meet the Affordable Care Act requirements for a minimum essential benefits plan.

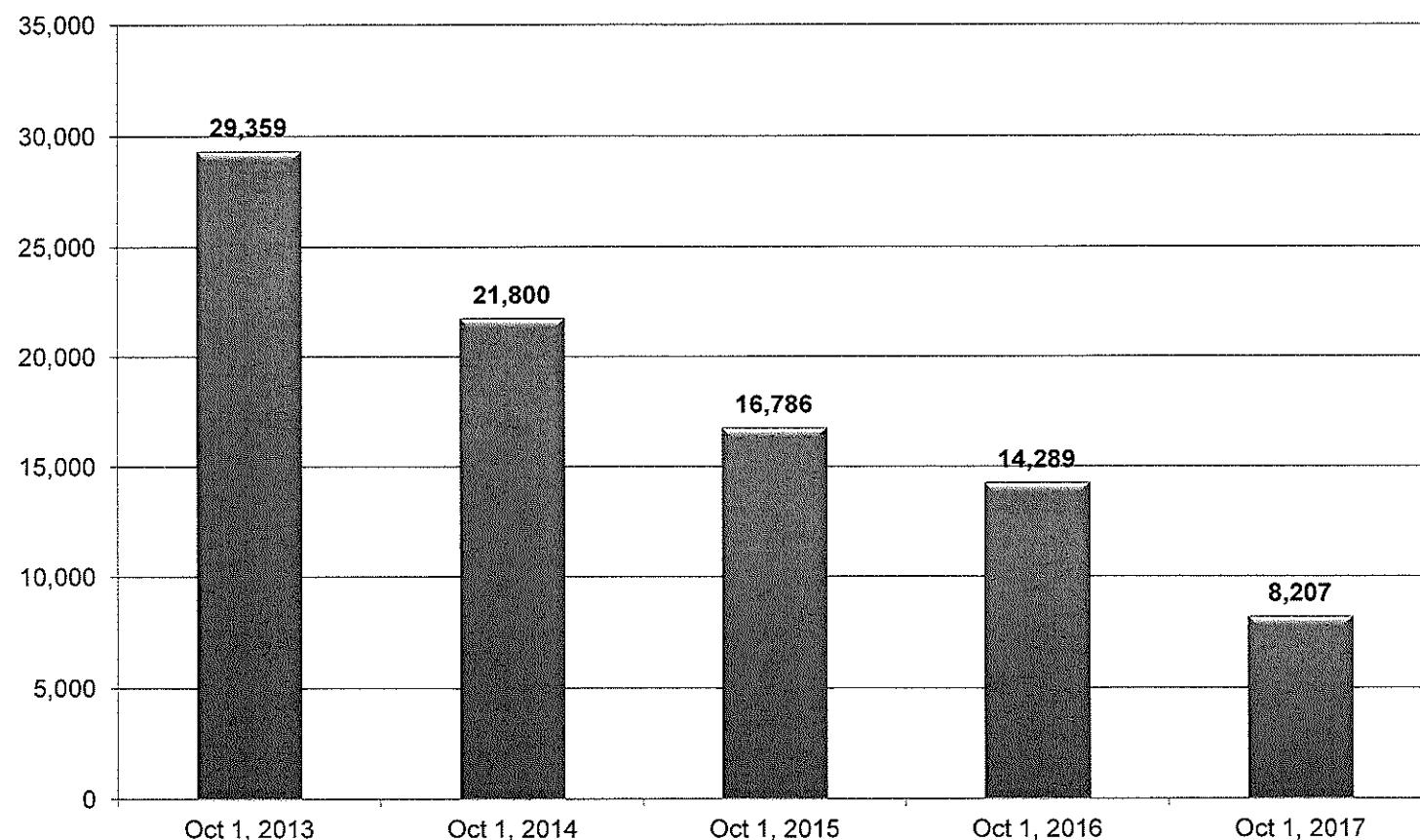
Comment [DW1]: Limited benefit coverage?  
Instead of insurance

### Data Limitations/Considerations

The FPP and IFPN are programs with limited benefits and declining enrollment due to increased health care coverage, as FPP and IFPN do not meet the Affordable Care Act (ACA) definition of 'minimal essential coverage.'

It is important to note that data ~~are~~ is collected from in a variety of systems, including eligibility and claims systems. With the recent transition to managed care and the transition from IFPN to the FPP, data may not have been collected in the exact same way, due to differences in claims processing, etc. A work group was assembled to ensure ~~we're~~ we are accounting for these changes and how they impact the data. The data workgroup developed a data dictionary for the data elements reported in this document. It is located [here](#).

**Figure 1. Number of Enrolled Members**

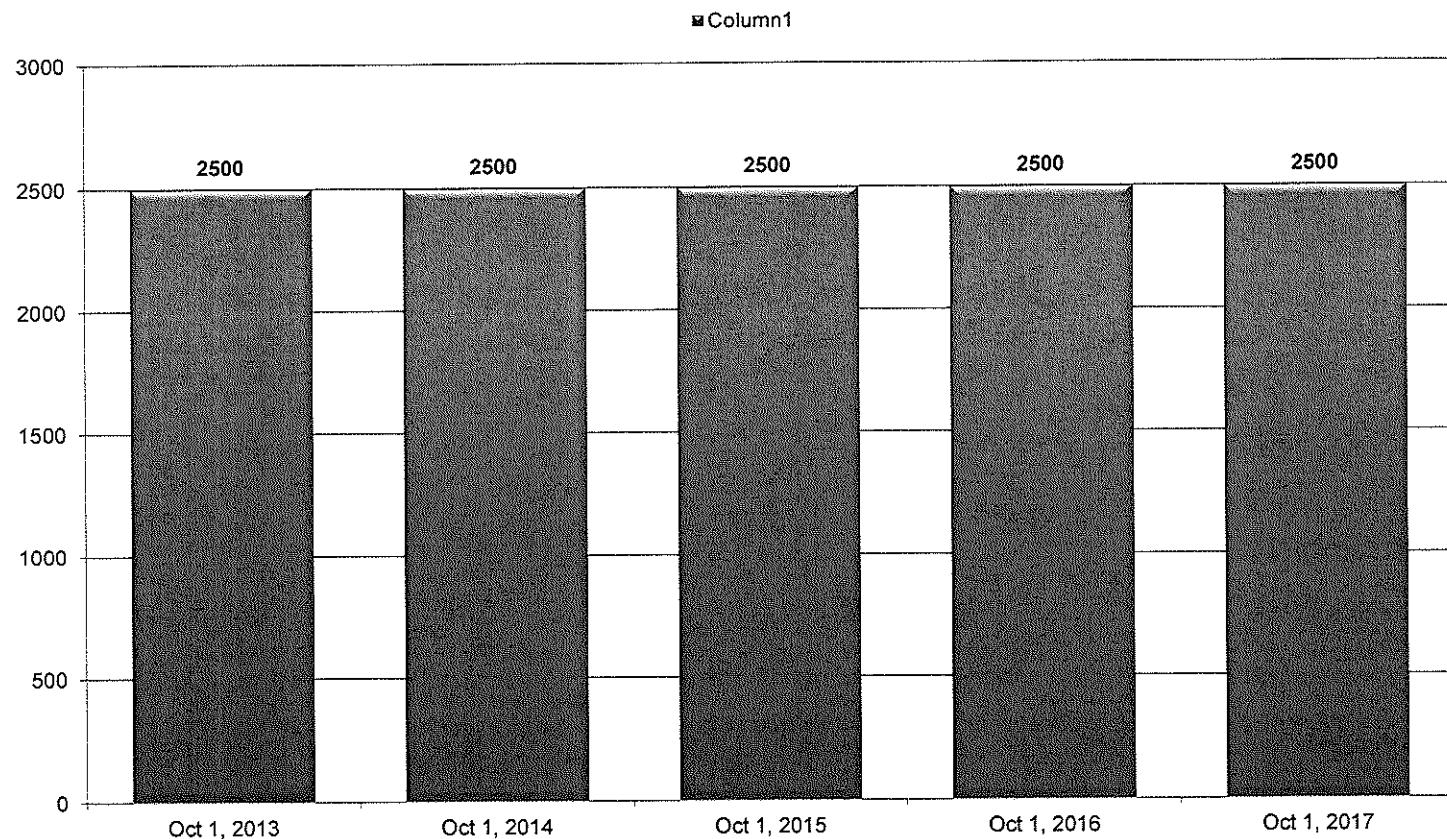


*Unduplicated Enrolled Members' Numbers*

*Data Source: Monthly Medicaid Eligibility Report Mars Report IAMM3700-R001, R002, R003 from MMIS*

*The FPP and IFPN are programs with limited benefits and declining enrollment due to increased health care coverage, as FPP and IFPN do not meet the Affordable Care Act (ACA) definition of 'minimal essential coverage.'*

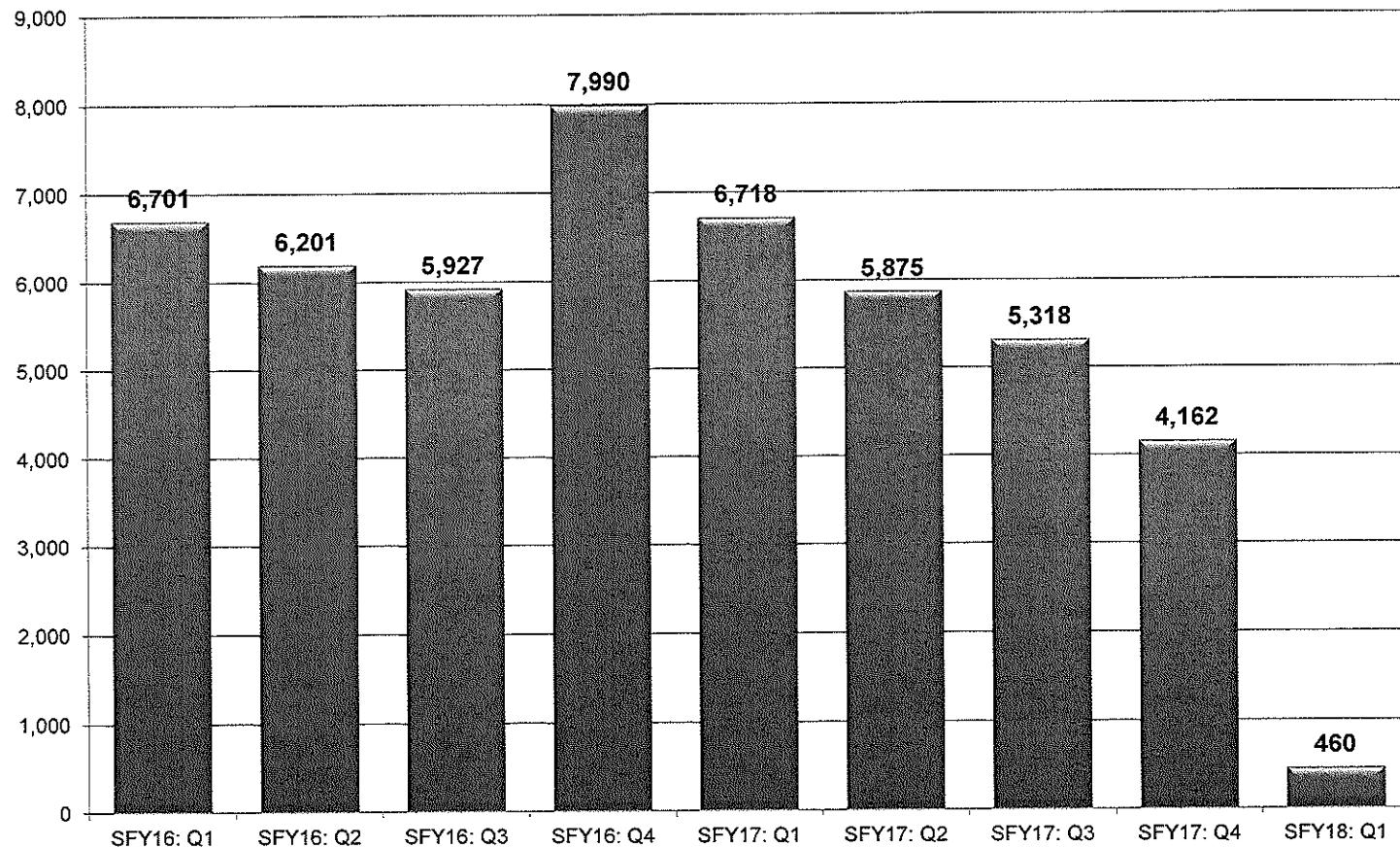
**Figure 2. Confidential Enrolled FFP Members**



Data Source: FPP Eligibility System

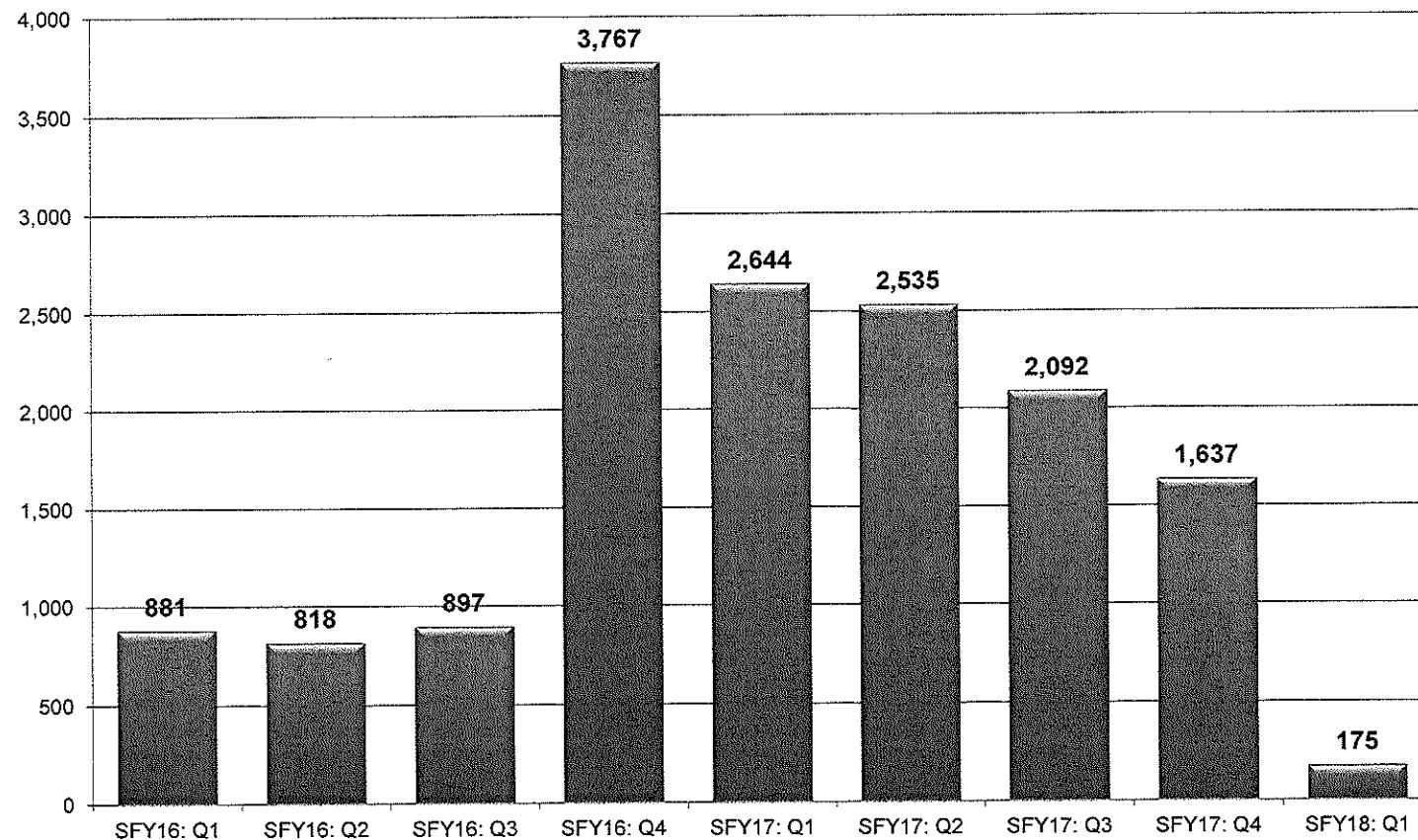
Duplicated Enrolled Members' Numbers (may include members enrolled in Medicaid due to a pregnancy ending)

**Figure 3. Services Accessed by Members**



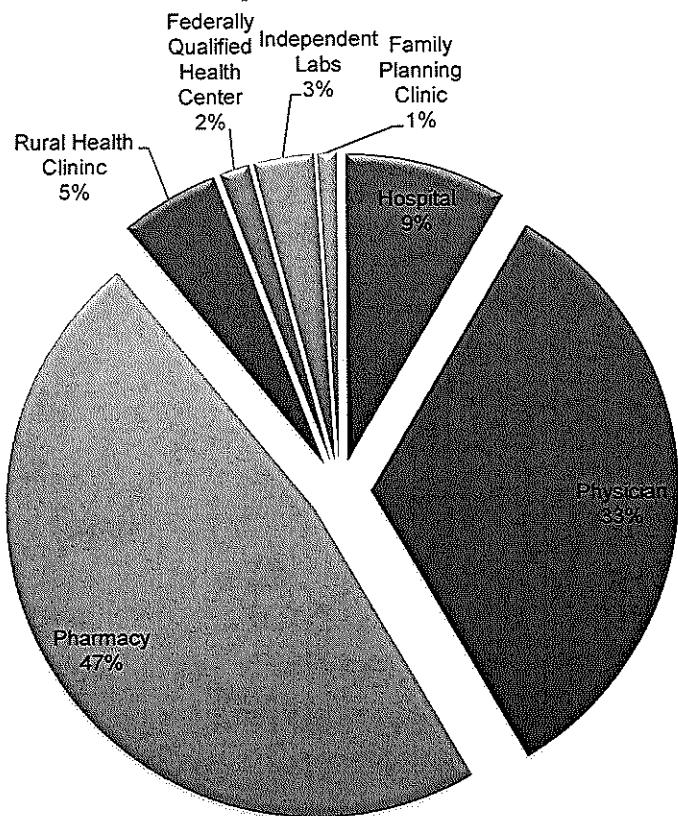
*Data Source: Core Ad Hoc Report/Query*

### Figure 4. Unique Provider Count



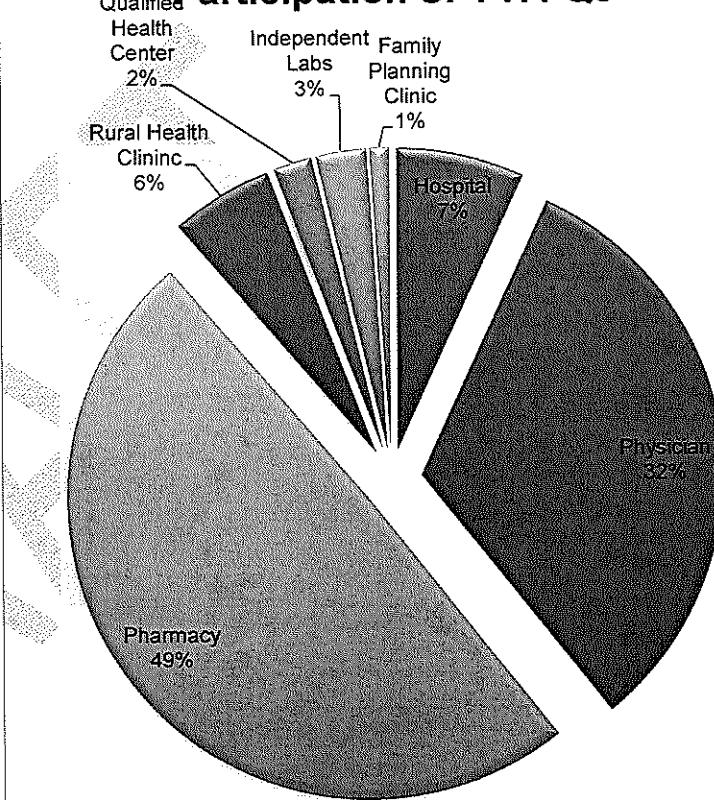
Data Source: Core Ad Hoc Report/Query

**Figure 5. Provider Participation SFY17: Q2**



Data Source: DDM

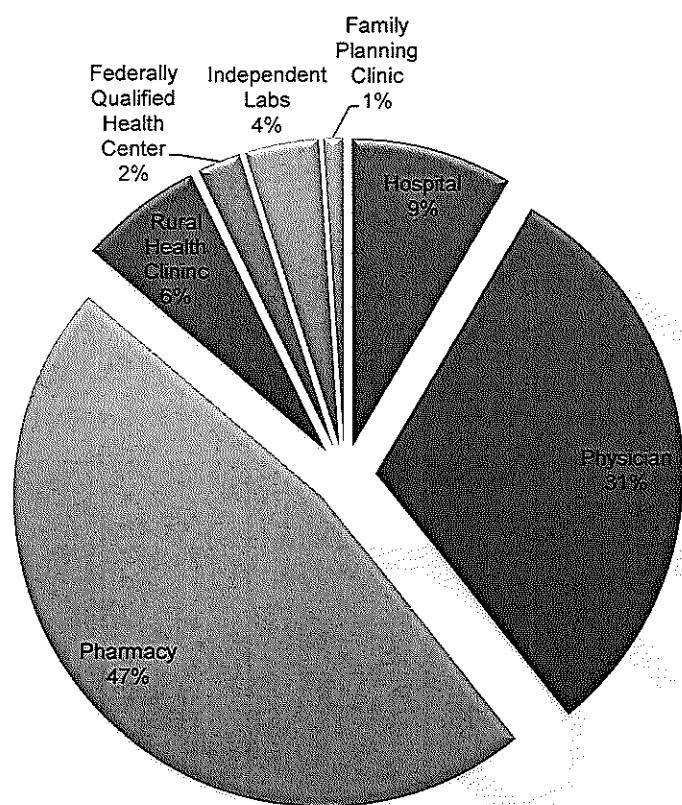
**Figure 6. Provider Participation SFY17: Q3**



Data Source: DDM

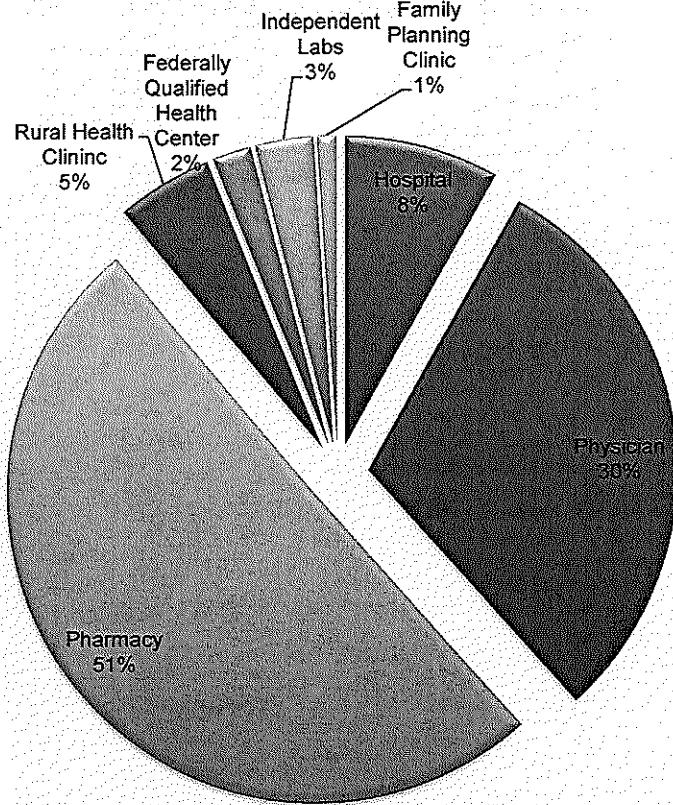
Comment [KD2]: Clinic is misspelled on pages 6 and 7.

**Figure 7. Provider Participation SFY17: Q4**



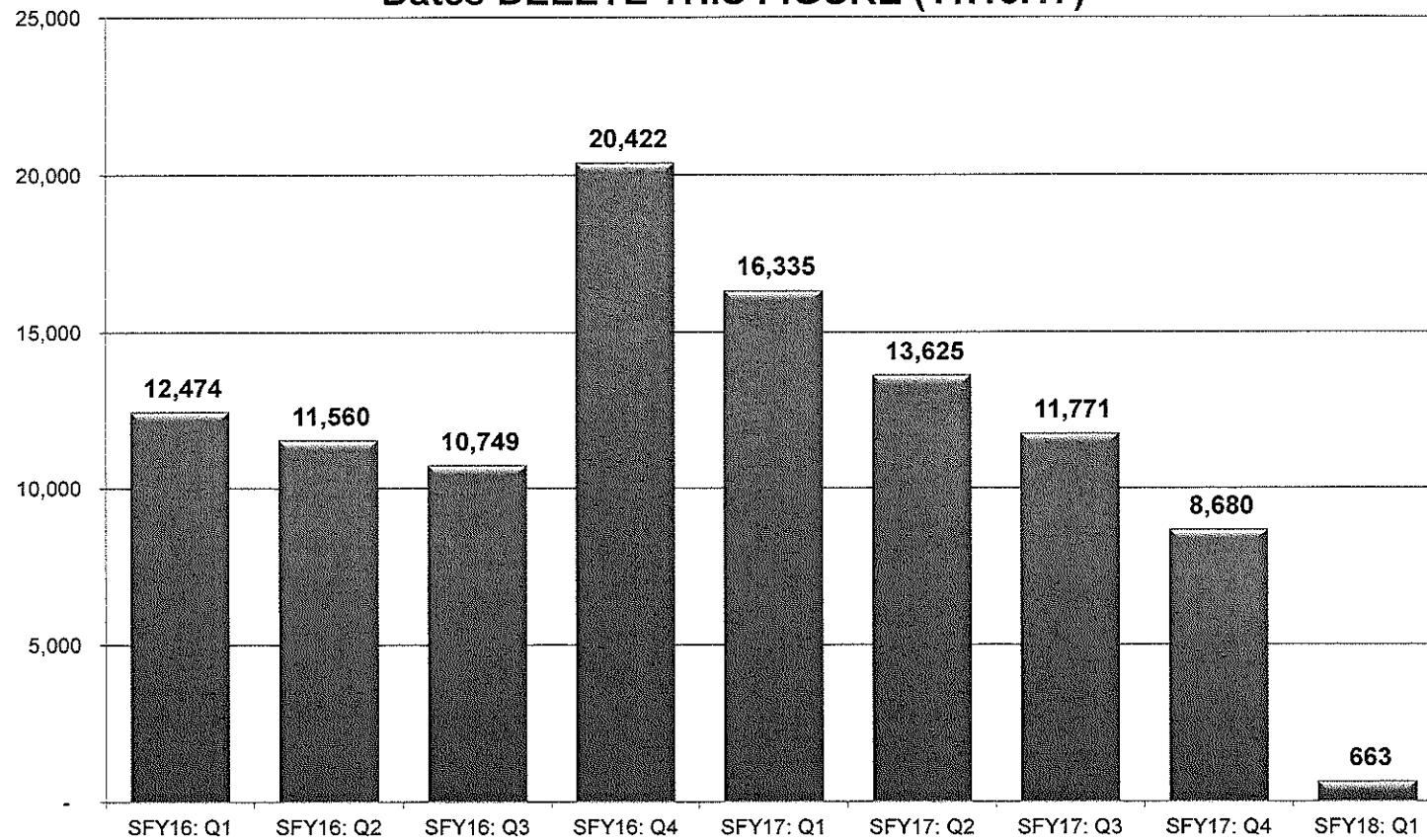
Data Source: DDM

**Figure 8. Provider Participation SFY18: Q1**



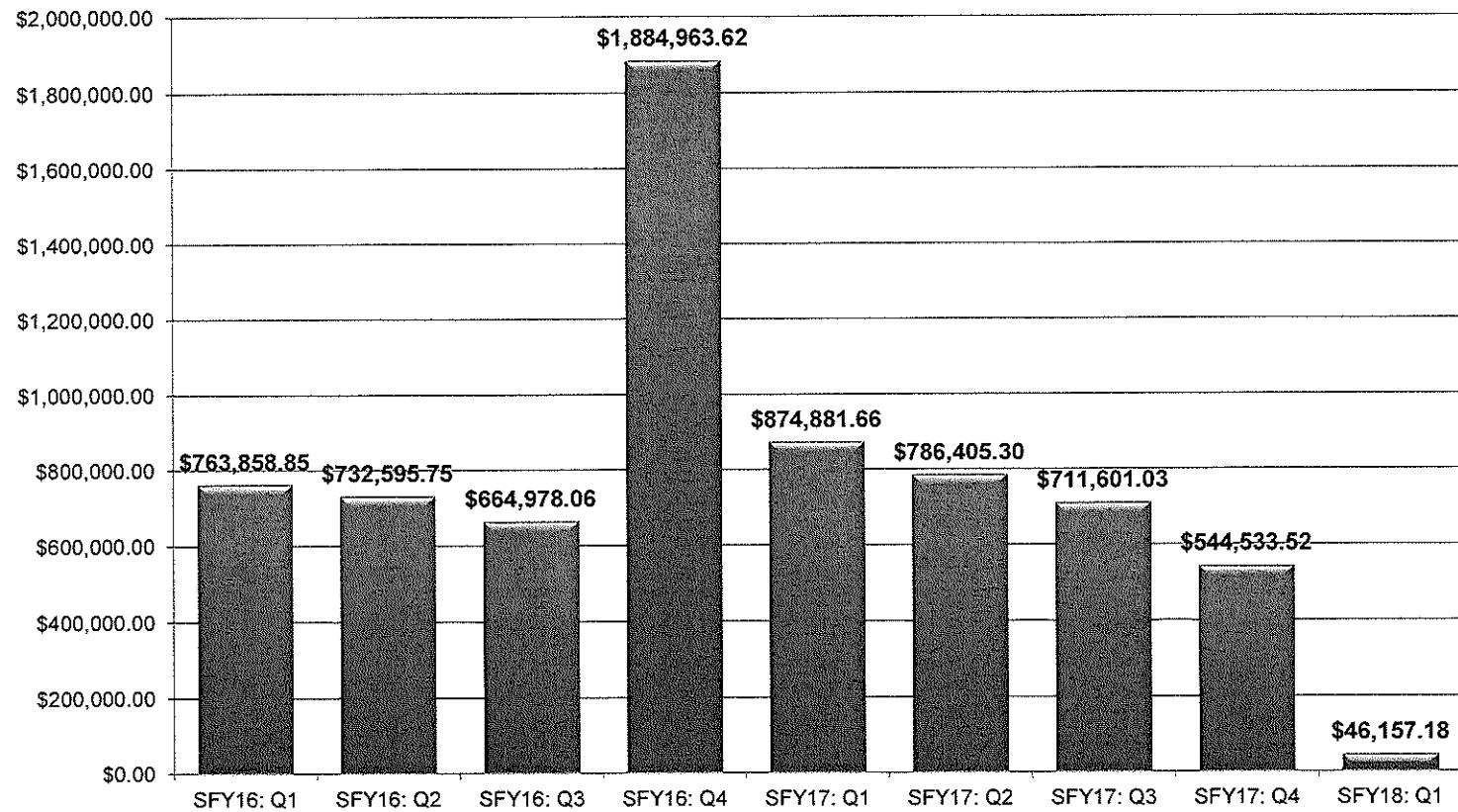
Data Source: DDM

**Figure 9. Count of Paid Claims Based on Claims Payment Dates** ~~DELETE THIS FIGURE (11.15.17)~~



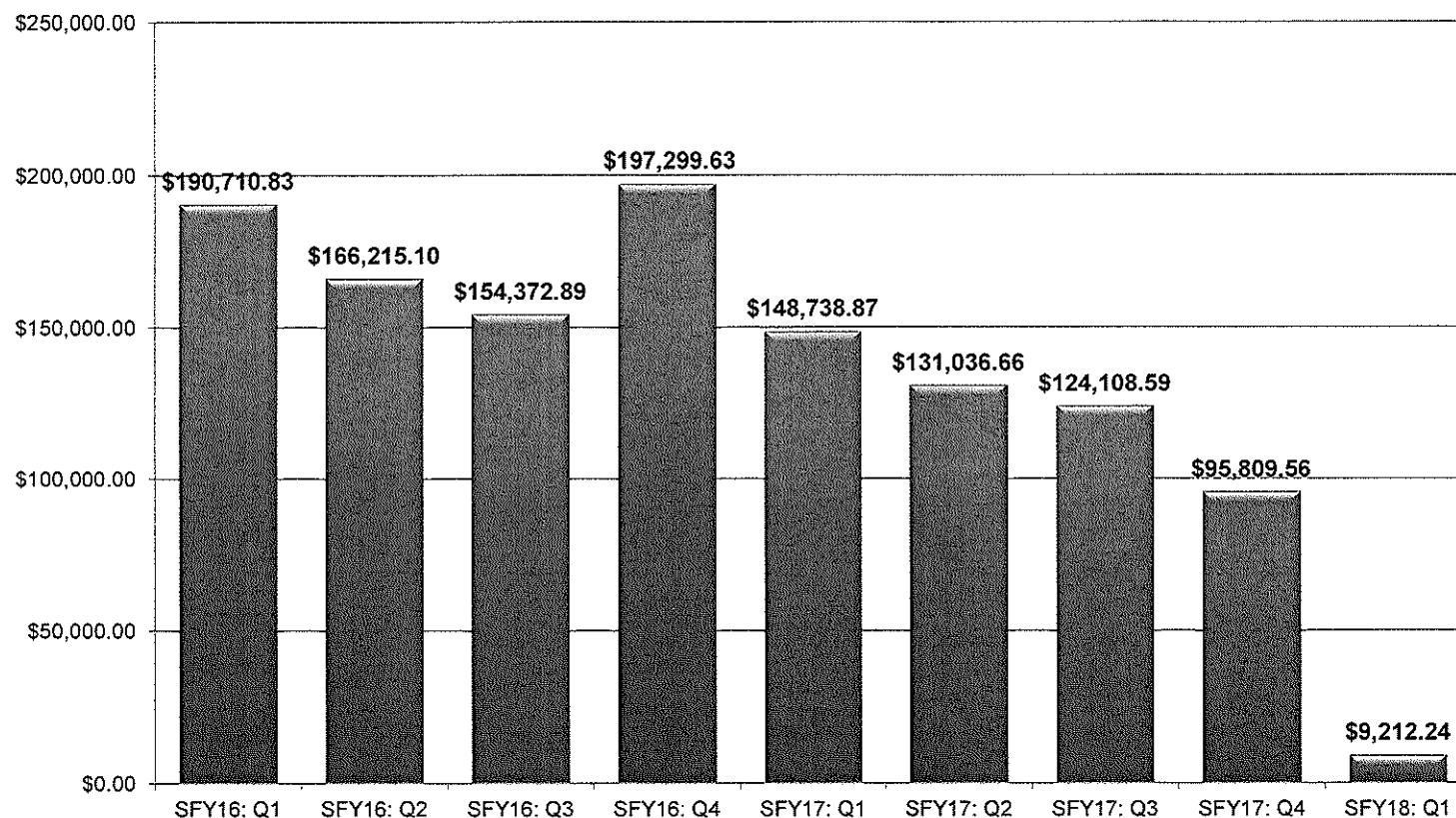
*Data Source: Core Ad Hoc Report/Query*

**Figure 10. Reimbursement of Services**



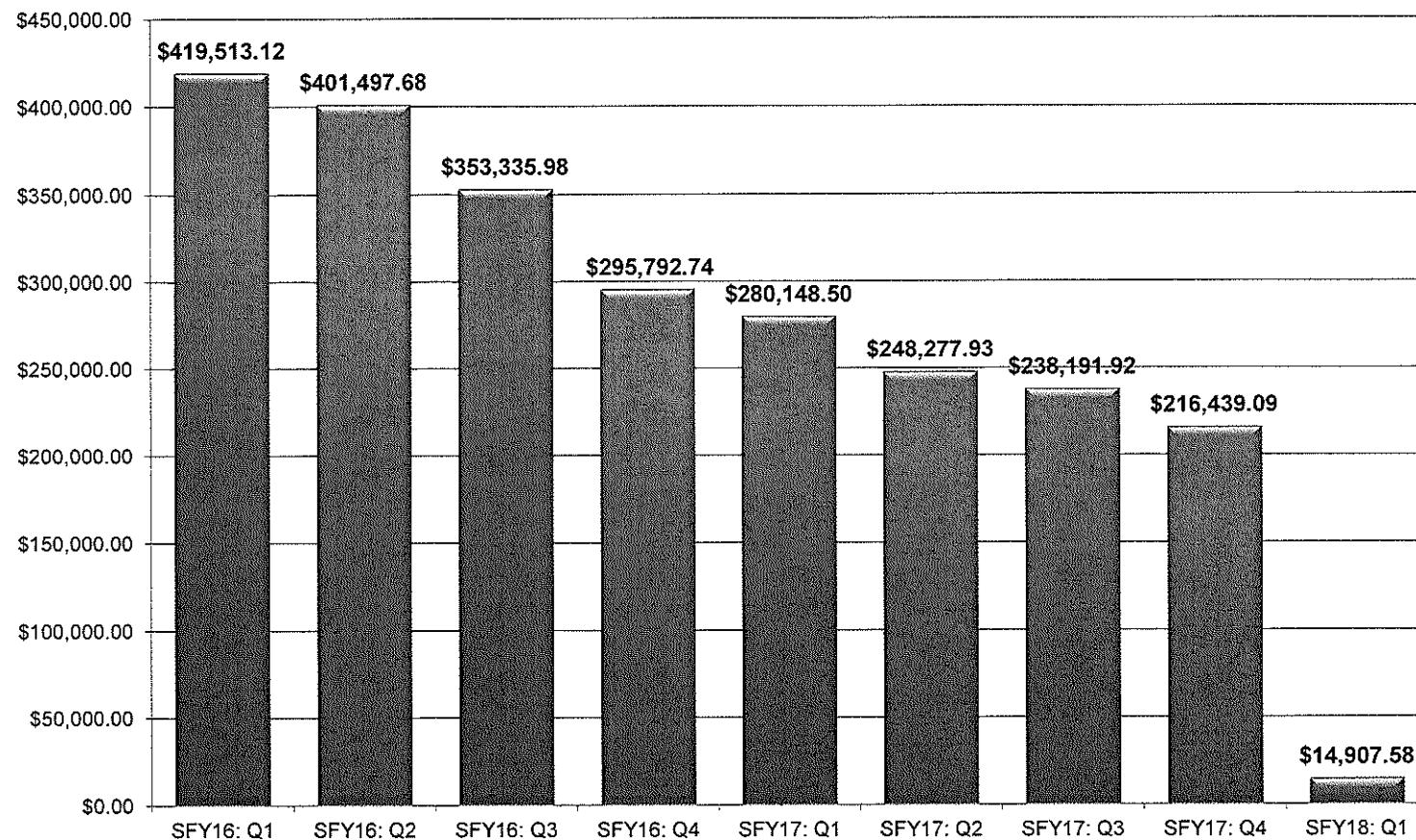
*Data Source: Core Ad Hoc Report/Query*

**Figure 11. Payments for Office Visits**



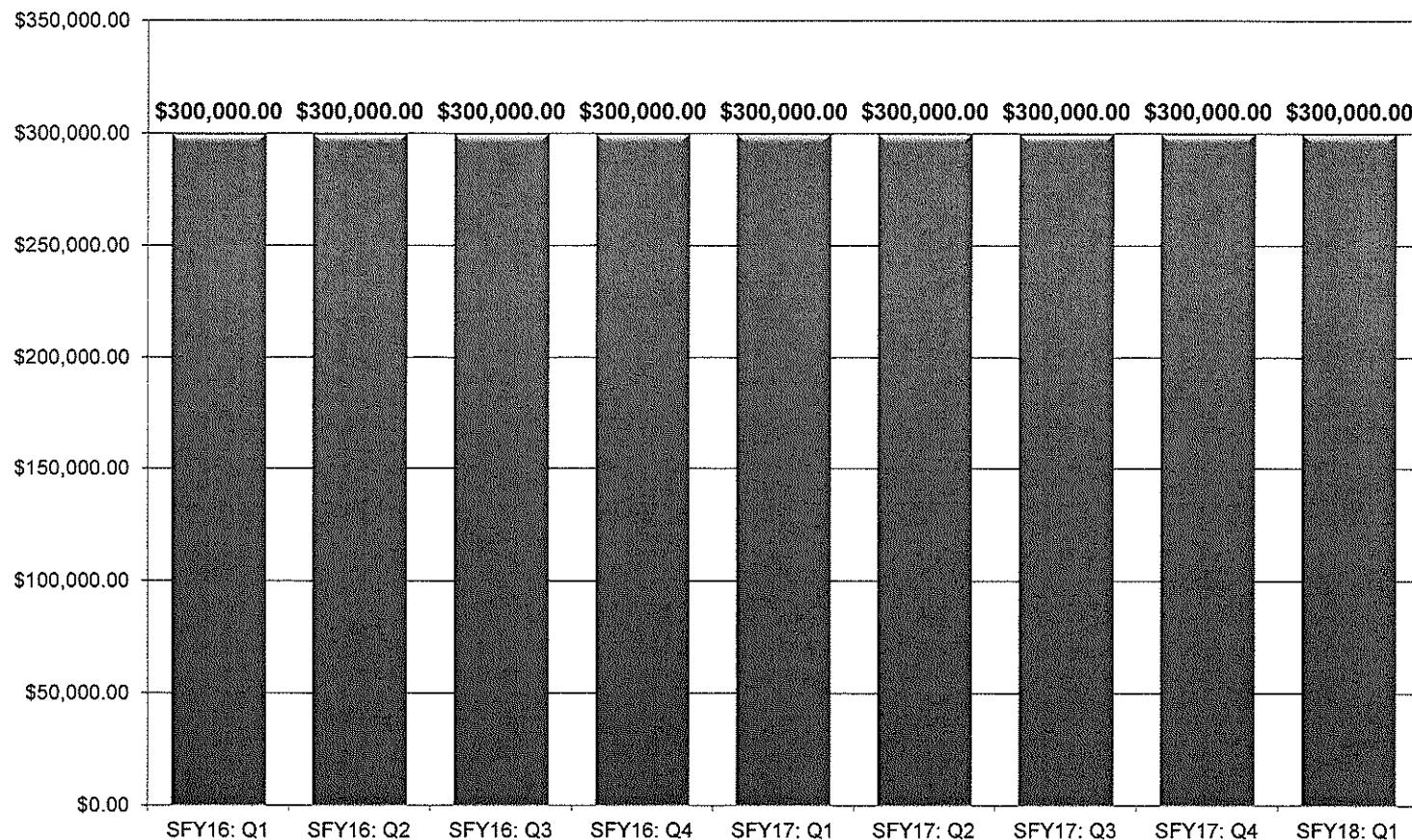
*Data Source: Core Ad Hoc Report/Query*

**Figure 12. Payments for Contraceptive Services**



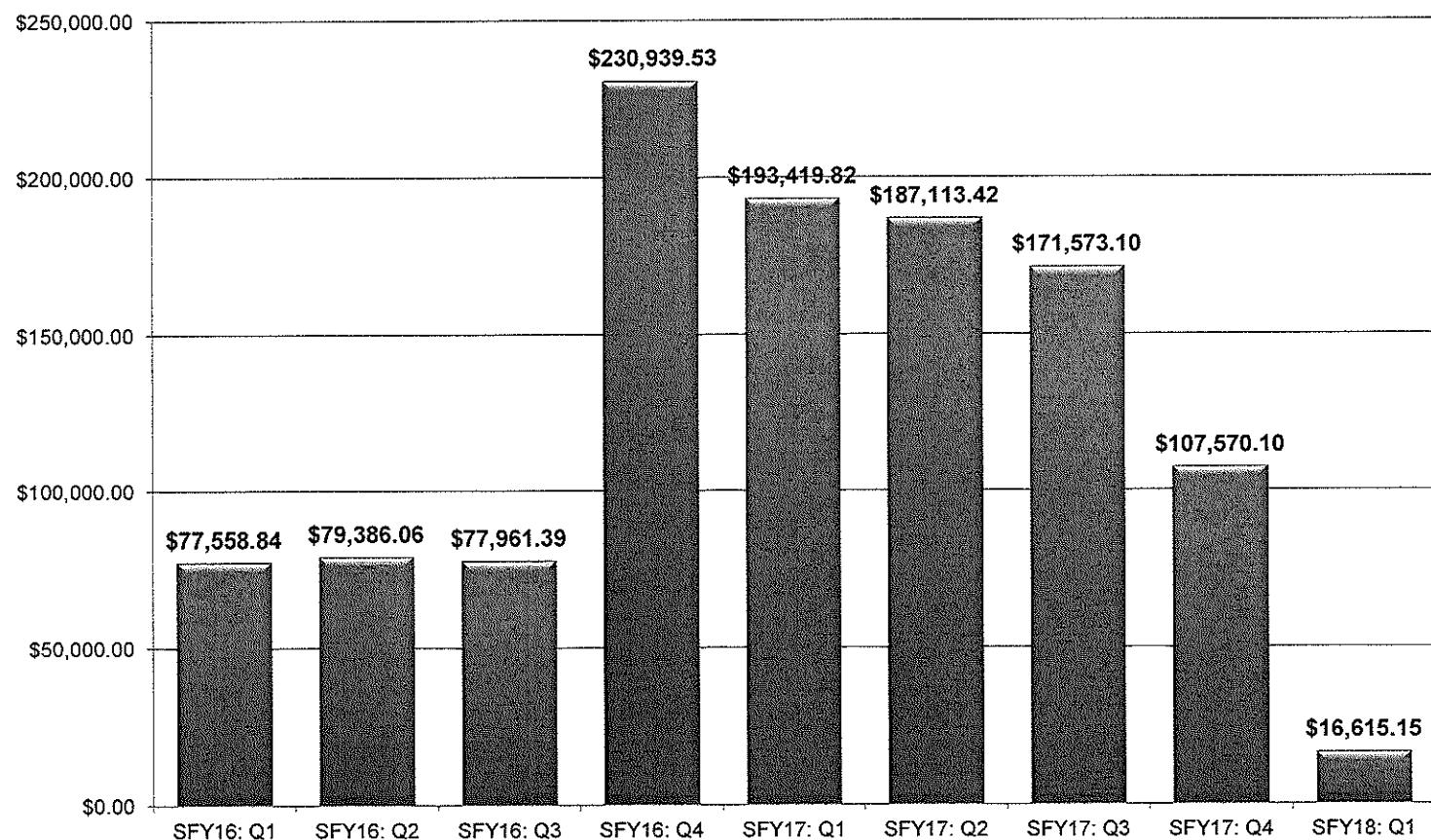
*Data Source: Core Ad Hoc Report/Query*

**Figure 13. Payments for Selective Services**



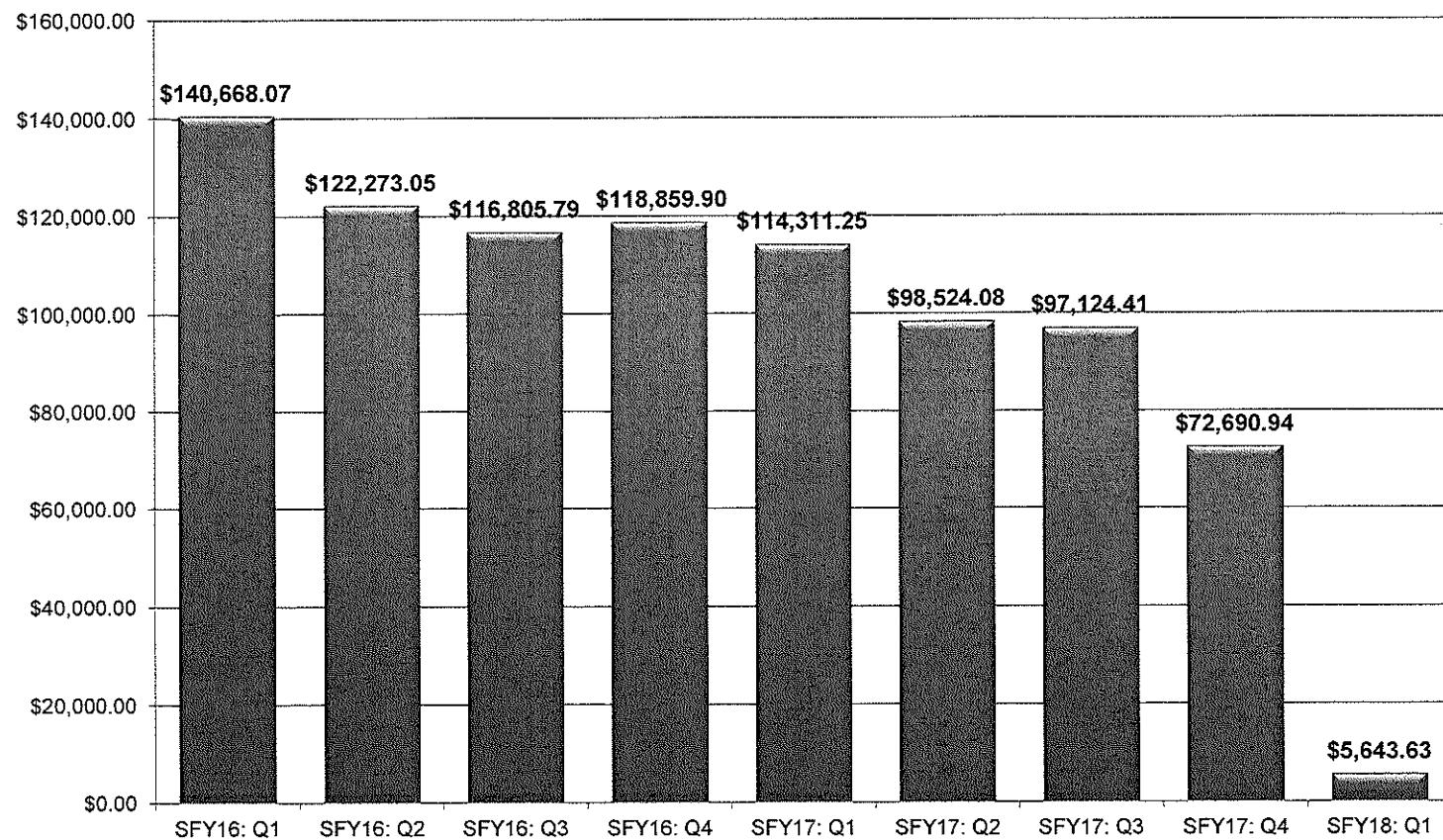
*Data Source: Core Ad Hoc Report/Query*

### Figure 14. Pharmacy Payments



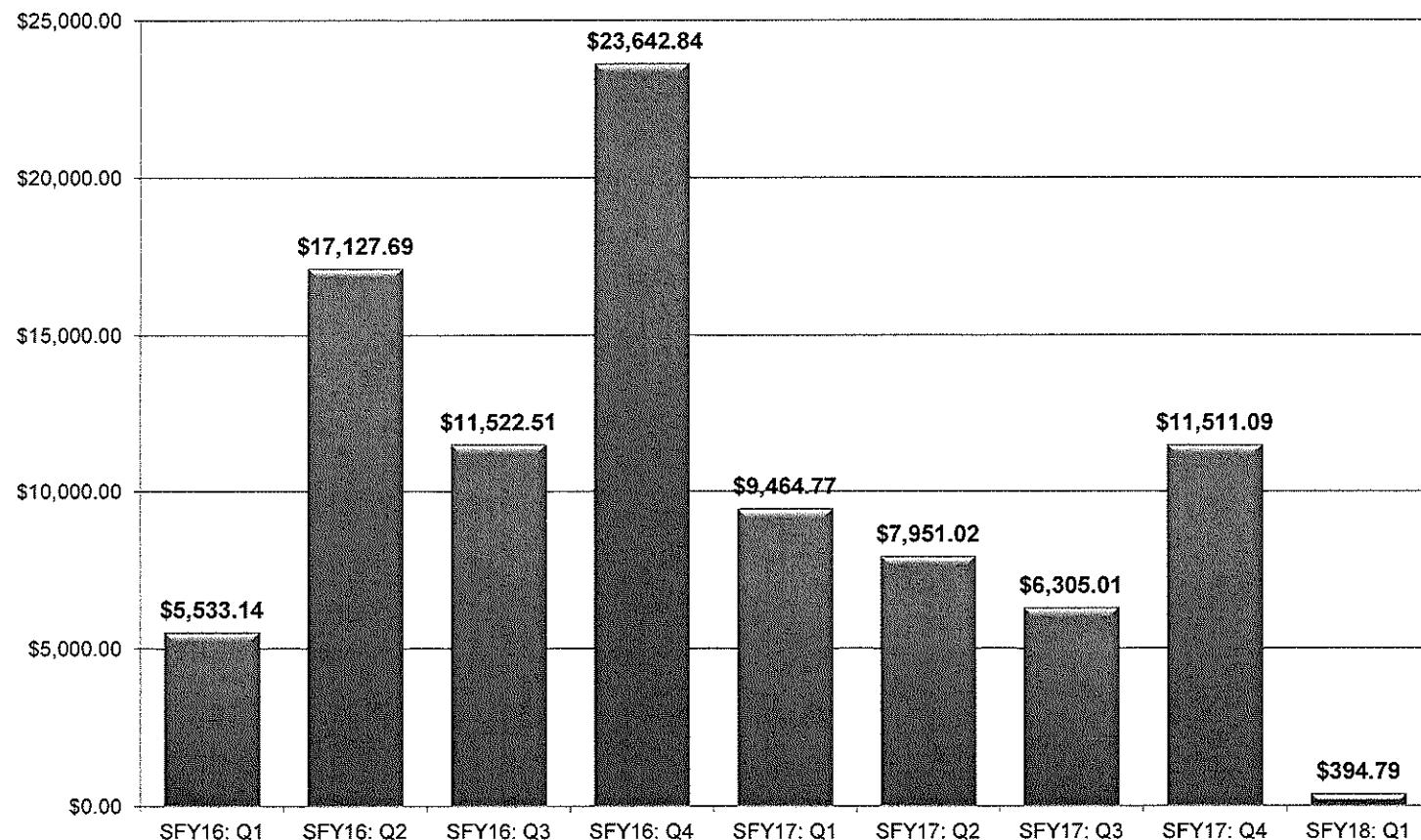
Data Source: Core Ad Hoc Report/Query

**Figure 15. Payments for Labs and X-rays**



*Data Source: Core Ad Hoc Report/Query*

**Figure 16. Payments for Surgical Services**



*Data Source: Core Ad Hoc Report/Query*

## Data dictionary

### Key Terms and abbreviations:

MMIS

Mars

SFY – State fiscal year (July 1 – June 30)

**Figure 1. Number of enrolled members**

Data Source: Monthly Medicaid Eligibility Report Mars Report IAMM3700-R001, R002, R003 from MMIS

Abstract: This data source contains an unduplicated count of all persons who meet program eligibility criteria and have enrolled in the Iowa Family Planning Waiver (10.01.13 – 06.30.17) or in the Family Planning Program (07.01.17 to present). Enrolled persons may not have yet obtained services.

Comment [KD3]: Do we need to include eligibility criteria?

**Figure 2. Confidential enrolled FFP members**

Data Source: Family Planning Program Eligibility System

Abstract: Duplicated count of members seeking confidential services. Those seeking confidential services include but are not limited to clients under the age of 18, clients at risk of domestic violence or others any member who seeks to maintain privacy regarding having obtained services at a family planning provider. Typically, the explanation of benefits (EOB) will not be sent to the policy holder as a way to protect confidentiality if the client is not the policy holder.

Comment [KD4]: Access vs obtained?

Comment [DW5]: I like accessed

**Figure 3. Services accessed by members**

Data source: Core Ad Hoc Report/Query

Abstract: Distinct count of services obtained by members enrolled in IFPH or FPP. The count is based on CPT codes and a single client may have accessed several services (i.e. preventive visit that includes height and weight check, blood pressure and hematocrit). Services access counts based on the date of service (or date service was reimbursed).

Comment [KD6]: Which is correct?

Comment [DW7]: Date claim was paid

#### **Figure 4. Unique provider count**

Data source: Core Ad Hoc Report/Query

Abstract: Count of unique providers that includes clinicians, clinic sites including family planning clinics, federally qualified health care centers, rural health clinics, as well as laboratories, and pharmacy services based on the National Provider Identification Number (NPI).

#### **Figure 5: Provider participation SFY17: Quarter 2 (10.01.16 – 12.31.16)**

Data source: DDM

Abstract: Percentage of unique providers and provider types based on unique counts

Comment [KD8]: Need to spell out – define DDM

Comment [DW9]: Department of Data Management?

#### **Figure 6: Provider participation SFY17: Quarter 3 (01.01.17 – 03.31.17)**

Data source: DDM

Abstract: Percentage of unique providers and provider types based on unique counts

#### **Figure 7: Provider participation SFY17: Quarter 4 (04.30.17- 06.30.17)**

Data source: DDM

Abstract: Percentage of unique providers and provider types based on unique counts

#### **Figure 8: Provider participation SFY18: Quarter 1 (07.01.17 – 10.31.17)**

Data source: DDM

Abstract: Percentage of unique providers and provider types based on unique counts

**Figure 9. Count of paid claims submitted by and reimbursed to IFPN or FPP providers At 11.15.17 meeting decided to delete Figure 9**

Data source: Core Ad Hoc Report/Query

Abstract: Count of unique paid claims for service provided by all provider types including clinicians, clinic sites including family planning clinics, federally qualified health care centers, rural health clinics, as well as laboratories, and pharmacy services based on the provider NPI.

Comment [KD10]: What is the data source? MMIS - what does Core mean?

**Figure 10. Sum of payments distributed for service reimbursement | Reimbursement of services**

Data source: Core Ad Hoc Report/Query

Abstract: Sum of dollar value for reimbursement of services, for all types of services including but not limited to clinic visits, contraceptive devices, oral contraceptives, blood work, pap smears and other laboratory services and based on CPT and diagnostic codes.

Comment [KD11]: Recommended edit.

**Figure 11. Payments for office visits**

Data source: Core Ad Hoc Report/Query

Abstract: Sum of dollar value for reimbursement of services for office visits only. These reimbursement amounts include: preventive visits, contraceptive method review and follow-up, IUD and implant insertions, as well as other procedures related to the office visit. These sums exclude....

Comment [KD12]: Are these categories of reimbursement mutually exclusive?

Comment [DW13]: If I understand your question, they are different. IFPN services can be obtained at outpatient facilities but could include hospitals, ER, ambulatory surgery centers. Those would likely be procedures. Office visits would be preventive visits and evaluation and management visits. Procedures can be billed from office visits but are still different.

Comment [KD14]: How is payment different than reimbursement? Recommend consistent language.

Comment [DW15]: Semantics I think. Providers may say they are being reimbursed for their time, supplies, etc that they have purchased and used on the client. Payers would say they are paying for services.

**Figure 12. Payments for contraceptive services**

Data source: Core Ad Hoc Report/Query

Abstract: Sum of dollar value for reimbursement of contraceptive services. These reimbursement amounts include: list of services. These reimbursement amounts exclude: list of services.

**Figure 13. Payments for selective services**

Data source: Core Ad Hoc Report/Query

Abstract: Sum of dollar value for reimbursement of selected services. These reimbursement amounts include: list of services. These reimbursement amounts exclude: list of services.

**Figure 14. Pharmacy payments**

Data source: Core Ad Hoc Report/Query

Abstract: Sum of dollar value for reimbursement of services for pharmacy payments. These reimbursement amounts include: list of services. These reimbursement amounts exclude: list of services.

**Figure 15. Payments for labs and X-rays**

Data source: Core Ad Hoc Report/Query

Abstract: Sum of dollar value for reimbursement of services for lab and x-ray services. These reimbursement amounts include: list of services. These reimbursement amounts exclude: list of services.

**Figure 16. Payments for surgical services**

Data source: Core Ad Hoc Report/Query

Abstract: Sum of dollar value for reimbursement of services for surgical services. These reimbursement amounts include: list of services. These reimbursement amounts exclude: list of services.

## **Highland, Matt**

---

**From:** Johnson, Deborah <djohnso6@dhs.state.ia.us>  
**Sent:** Friday, November 17, 2017 12:12 PM  
**To:** Rickman, Wendy  
**Cc:** Lovelady, Julie; Julie Allison; Amela Alibasic  
**Subject:** Re: RFI; J. Bronsink; Family Planning Dollars; Nov. 17 ,2017

thanks Wendy

Deborah Johnson  
Bureau Chief Policy  
Iowa Medicaid Enterprise  
(515) 256-4662 (Office)  
(515) 782-6162 (Cell)  
(515) 256-1360 (Fax)  
[djohnso6@dhs.state.ia.us](mailto:djohnso6@dhs.state.ia.us)

On Fri, Nov 17, 2017 at 11:56 AM, Rickman, Wendy <[wrickma@dhs.state.ia.us](mailto:wrickma@dhs.state.ia.us)> wrote:  
fyi

----- Forwarded message -----

From: **Bentrott, Merea** <[mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)>  
Date: Fri, Nov 17, 2017 at 11:12 AM  
Subject: RFI; J. Bronsink; Family Planning Dollars; Nov. 17 ,2017  
To: DHS RFI <[rfi@dhs.state.ia.us](mailto:rfi@dhs.state.ia.us)>, "Rossander, Harry V" <[hrossan@dhs.state.ia.us](mailto:hrossan@dhs.state.ia.us)>  
Cc: Wendy Rickman <[wrickma@dhs.state.ia.us](mailto:wrickma@dhs.state.ia.us)>, Jean M Slaybaugh <[jslayba@dhs.state.ia.us](mailto:jslayba@dhs.state.ia.us)>

RFI to Fiscal/ACFS

----- Forwarded message -----

From: **Bronsink, Josh [LEGIS]** <[Josh.Bronsink@legis.iowa.gov](mailto:Josh.Bronsink@legis.iowa.gov)>  
Date: Fri, Nov 17, 2017 at 10:25 AM  
Subject: Family Planning Dollars  
To: "Pottebaum, Nic [IGOV]" <[nic.pottebaum@iowa.gov](mailto:nic.pottebaum@iowa.gov)>, "Stopulos, Ted [IGOV]" <[ted.stopulos@iowa.gov](mailto:ted.stopulos@iowa.gov)>, "Bentrott, Merea [DHS]" <[mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)>  
Cc: "Schneider, Charles [LEGIS]" <[Charles.Schneider@legis.iowa.gov](mailto:Charles.Schneider@legis.iowa.gov)>, "Lofgren, Mark [LEGIS]" <[Mark.Lofgren@legis.iowa.gov](mailto:Mark.Lofgren@legis.iowa.gov)>, "Greene, Tom" <[Tom.Greene@legis.iowa.gov](mailto:Tom.Greene@legis.iowa.gov)>, "Segebart, Mark [LEGIS]" <[Mark.Segebart@legis.iowa.gov](mailto:Mark.Segebart@legis.iowa.gov)>, "Zaun, Brad [LEGIS]" <[Brad.Zaun@legis.iowa.gov](mailto:Brad.Zaun@legis.iowa.gov)>, "Johansen, Eric [LEGIS]" <[Eric.Johansen@legis.iowa.gov](mailto:Eric.Johansen@legis.iowa.gov)>

Good morning colleagues –

I have requests from several of our members, a few which are cc'd on this email, to find out who has received funds as a Family Planning Program Providers.

Specifically those moneys that the state appropriated in lieu of receiving the federal funds which prohibited excluding abortion providers.

Thank you and have a wonderful Thanksgiving.

Joshua Bronsink, Analyst

Senate Republican Caucus Staff

State Capitol, RM 112

Des Moines, IA 50319

Phone: (515) 281-0250

--  
Merea D. Bentrott, PhD  
Policy Advisor and Legislative Liaison  
Department of Human Services  
515-401-6180  
[mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)

## **Highland, Matt**

---

**From:** Wendy Rickman <wrickma@dhs.state.ia.us>  
**Sent:** Friday, November 17, 2017 12:07 PM  
**To:** Melanie Mathes  
**Subject:** Fwd: RFI; J. Bronsink; Family Planning Dollars; Nov. 17 ,2017

----- Forwarded message -----

From: Rickman, Wendy <[wrickma@dhs.state.ia.us](mailto:wrickma@dhs.state.ia.us)>  
Date: Fri, Nov 17, 2017 at 12:02 PM  
Subject: Re: RFI; J. Bronsink; Family Planning Dollars; Nov. 17 ,2017  
To: Slaybaugh, Jean M <[jslayba@dhs.state.ia.us](mailto:jslayba@dhs.state.ia.us)>  
CC: Bentrott, Merea <[mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)>, DHS RFI <[rfi@dhs.state.ia.us](mailto:rfi@dhs.state.ia.us)>, Rossander, Harry V <[hrossan@dhs.state.ia.us](mailto:hrossan@dhs.state.ia.us)>

i have forwarded to them. we will work it jointly...  
Thanks so much

On Fri, Nov 17, 2017 at 12:00 PM, Slaybaugh, Jean M <[jslayba@dhs.state.ia.us](mailto:jslayba@dhs.state.ia.us)> wrote:  
I think this is IME lead

On Fri, Nov 17, 2017 at 11:12 AM, Bentrott, Merea <[mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)> wrote:  
RFI to Fiscal/ACFS

----- Forwarded message -----

From: **Bronsink, Josh [LEGIS]** <[Josh.Bronsink@legis.iowa.gov](mailto:Josh.Bronsink@legis.iowa.gov)>  
Date: Fri, Nov 17, 2017 at 10:25 AM  
Subject: Family Planning Dollars  
To: "Pottebaum, Nic [IGOV]" <[nic.pottebaum@iowa.gov](mailto:nic.pottebaum@iowa.gov)>, "Stopulos, Ted [IGOV]" <[ted.stopulos@iowa.gov](mailto:ted.stopulos@iowa.gov)>, "Bentrott, Merea [DHS]" <[mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)>  
Cc: "Schneider, Charles [LEGIS]" <[Charles.Schneider@legis.iowa.gov](mailto:Charles.Schneider@legis.iowa.gov)>, "Lofgren, Mark [LEGIS]" <[Mark.Lofgren@legis.iowa.gov](mailto:Mark.Lofgren@legis.iowa.gov)>, "Greene, Tom" <[Tom.Greene@legis.iowa.gov](mailto:Tom.Greene@legis.iowa.gov)>, "Segebart, Mark [LEGIS]" <[Mark.Segebart@legis.iowa.gov](mailto:Mark.Segebart@legis.iowa.gov)>, "Zaun, Brad [LEGIS]" <[Brad.Zaun@legis.iowa.gov](mailto:Brad.Zaun@legis.iowa.gov)>, "Johansen, Eric [LEGIS]" <[Eric.Johansen@legis.iowa.gov](mailto:Eric.Johansen@legis.iowa.gov)>

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[mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)

--  
*Jean M. Slaybaugh*  
Chief Financial Officer  
515-281-4987

## **Highland, Matt**

---

**From:** Rickman, Wendy <wrickma@dhs.state.ia.us>  
**Sent:** Friday, November 17, 2017 12:02 PM  
**To:** Slaybaugh, Jean M  
**Cc:** Bentrott, Merea; DHS RFI; Rossander, Harry V  
**Subject:** Re: RFI; J. Bronsink; Family Planning Dollars; Nov. 17 ,2017

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Thanks so much

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RFI to Fiscal/ACFS

----- Forwarded message -----

From: **Bronsink, Josh [LEGIS]** <[Josh.Bronsink@legis.iowa.gov](mailto:Josh.Bronsink@legis.iowa.gov)>  
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Cc: "Schneider, Charles [LEGIS]" <[Charles.Schneider@legis.iowa.gov](mailto:Charles.Schneider@legis.iowa.gov)>, "Lofgren, Mark [LEGIS]" <[Mark.Lofgren@legis.iowa.gov](mailto:Mark.Lofgren@legis.iowa.gov)>, "Greene, Tom" <[Tom.Greene@legis.iowa.gov](mailto:Tom.Greene@legis.iowa.gov)>, "Segebart, Mark [LEGIS]" <[Mark.Segebart@legis.iowa.gov](mailto:Mark.Segebart@legis.iowa.gov)>, "Zaun, Brad [LEGIS]" <[Brad.Zaun@legis.iowa.gov](mailto:Brad.Zaun@legis.iowa.gov)>, "Johansen, Eric [LEGIS]" <[Eric.Johansen@legis.iowa.gov](mailto:Eric.Johansen@legis.iowa.gov)>

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Policy Advisor and Legislative Liaison  
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--

*Jean M. Slaybaugh*  
Chief Financial Officer  
515-281-4987

## Highland, Matt

---

**From:** Rickman, Wendy <wrickma@dhs.state.ia.us>  
**Sent:** Friday, November 17, 2017 11:57 AM  
**To:** Lovelady, Julie; Johnson, Deborah; Julie Allison; Amela Alibasic  
**Subject:** Fwd: RFI; J. Bronsink; Family Planning Dollars; Nov. 17 ,2017

fyi

----- Forwarded message -----

From: **Bentrott, Merea** <[mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)>  
Date: Fri, Nov 17, 2017 at 11:12 AM  
Subject: RFI; J. Bronsink; Family Planning Dollars; Nov. 17 ,2017  
To: DHS RFI <[rfi@dhs.state.ia.us](mailto:rfi@dhs.state.ia.us)>, "Rossander, Harry V" <[hrossan@dhs.state.ia.us](mailto:hrossan@dhs.state.ia.us)>  
Cc: Wendy Rickman <[wrickma@dhs.state.ia.us](mailto:wrickma@dhs.state.ia.us)>, Jean M Slaybaugh <[jslayba@dhs.state.ia.us](mailto:jslayba@dhs.state.ia.us)>

RFI to Fiscal/ACFS

----- Forwarded message -----

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Subject: Family Planning Dollars  
To: "Pottebaum, Nic [IGOV]" <[nic.pottebaum@iowa.gov](mailto:nic.pottebaum@iowa.gov)>, "Stopulos, Ted [IGOV]" <[ted.stopulos@iowa.gov](mailto:ted.stopulos@iowa.gov)>, "Bentrott, Merea [DHS]" <[mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)>  
Cc: "Schneider, Charles [LEGIS]" <[Charles.Schneider@legis.iowa.gov](mailto:Charles.Schneider@legis.iowa.gov)>, "Lofgren, Mark [LEGIS]" <[Mark.Lofgren@legis.iowa.gov](mailto:Mark.Lofgren@legis.iowa.gov)>, "Greene, Tom" <[Tom.Greene@legis.iowa.gov](mailto:Tom.Greene@legis.iowa.gov)>, "Segebart, Mark [LEGIS]" <[Mark.Segebart@legis.iowa.gov](mailto:Mark.Segebart@legis.iowa.gov)>, "Zaun, Brad [LEGIS]" <[Brad.Zaun@legis.iowa.gov](mailto:Brad.Zaun@legis.iowa.gov)>, "Johansen, Eric [LEGIS]" <[Eric.Johansen@legis.iowa.gov](mailto:Eric.Johansen@legis.iowa.gov)>

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State Capitol, RM 112

Des Moines, IA 50319

Phone: (515) 281-0250

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Merea D. Bentrott, PhD  
Policy Advisor and Legislative Liaison  
Department of Human Services  
515-401-6180  
[mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)

## Highland, Matt

---

**From:** Kane, Debbie <debbie.kane@idph.iowa.gov>  
**Sent:** Friday, November 17, 2017 9:18 AM  
**To:** Julie A. Allison; Wendy Rickman  
**Subject:** Most/moderately defined in attached document  
**Attachments:** Contraceptive performance measures.pdf

FYI - attached is the document I sent to Kim Laube that provides a definition of the contraceptive performance measures and discusses the issues of benchmarks.

Debra J. Kane, PhD, RN, PHCNS-BC  
MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention  
Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319  
P: 515.281.4952 | F: 515.725.1760 | [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)

*Promoting and Improving the Health of Iowans*

----- Forwarded message -----

From: **Kane, Debbie** <[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)>  
Date: Thu, Nov 16, 2017 at 11:26 AM  
Subject: Re: Revised DRAFT FFP Report with data dictionary - response requested by Noon on Wednesday, November 29  
To: Kim Laube <[klaube@lfsiowa.org](mailto:klaube@lfsiowa.org)>

You are welcome...I have attached information about the contraceptive measures.  
Debbie

Debra J. Kane, PhD, RN, PHCNS-BC  
MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention  
Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319  
P: 515.281.4952 | F: 515.725.1760 | [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)

*Promoting and Improving the Health of Iowans*

On Thu, Nov 16, 2017 at 11:11 AM, Kim Laube <[klaube@lfsiowa.org](mailto:klaube@lfsiowa.org)> wrote:

Thank you for changing my email address! I got this one with no trouble!

KL



Kimberly Laube, BA | Director of Life Ministries  
**Lutheran Family Service**  
P: (515) 251-4900 | C: (515) 669-5187 | F: (515) 251-7311 | [www.LFSiowa.org](http://www.LFSiowa.org)

[6200 Aurora Avenue Suite 410W, Urbandale, IA 50322](#)



*We take privacy seriously; please read our confidentiality notice [here](#).*

**From:** Kane, Debbie [mailto:[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)]  
**Sent:** Thursday, November 16, 2017 10:33 AM  
**To:** Deborah Johnson <[djohnso6@dhs.state.ia.us](mailto:djohnso6@dhs.state.ia.us)>; Denise Wheeler <[denise.wheeler@idph.iowa.gov](mailto:denise.wheeler@idph.iowa.gov)>; George Signs <[wsigns@dhs.state.ia.us](mailto:wsigns@dhs.state.ia.us)>; Jennifer Warren-Ulrick <[jennifer.warren-ulrick@ppheartland.org](mailto:jennifer.warren-ulrick@ppheartland.org)>; Julie A. Allison <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)>; Matt Briggs <[mbriggs@dhs.state.ia.us](mailto:mbriggs@dhs.state.ia.us)>; Matt Highland <[mhighla@dhs.state.ia.us](mailto:mhighla@dhs.state.ia.us)>; Merea Bentrott <[mbentrot@dhs.state.ia.us](mailto:mbentrot@dhs.state.ia.us)>; Rebecca Davis <[rdavis@dhs.state.ia.us](mailto:rdavis@dhs.state.ia.us)>; Wendy Rickman <[wrickma@dhs.state.ia.us](mailto:wrickma@dhs.state.ia.us)>; Jodi Tomlonovic <[jtomlonovic@fpcouncil.com](mailto:jtomlonovic@fpcouncil.com)>; Martin Cannon <[mcannonlaw@gmail.com](mailto:mcannonlaw@gmail.com)>; Kim Laube <[klaube@lfsiowa.org](mailto:klaube@lfsiowa.org)>  
**Subject:** Revised DRAFT FFP Report with data dictionary - response requested by Noon on Wednesday, November 29

Good day,

Attached is a revised FFP Report that includes the data dictionary (at the end of the document). In order to be prepared for the December 1st meeting, I ask you to submit your edits to me by noon on Wednesday, November 29th.

On another note, please watch your email for a doodle poll. Per our discussion at yesterday's meeting, the data group will need to meet in December - we will probably need 2 meetings.

Thanks,  
Debbie

Debra J. Kane, PhD, RN, PHCNS-BC  
MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention

*Promoting and Improving the Health of Iowans*

This email message and its attachments may contain confidential information that is exempt from disclosure under Iowa Code chapters 22, 139A, and other applicable law. Confidential information is for the sole use of the intended recipient. If you believe that you have received this transmission in error, please reply to the sender, and then delete all copies of this message and any attachments. If you are not the intended recipient, you are hereby notified that any review, use, retention, dissemination, distribution, or copying of this message is strictly prohibited by law.

## **Highland, Matt**

---

**From:** Allison, Julie A. <jalliso1@dhs.state.ia.us>  
**Sent:** Thursday, November 16, 2017 4:15 PM  
**To:** Kane, Debbie  
**Cc:** Deborah Johnson; Denise Wheeler; George Signs; Jennifer Warren-Ulrick; Matt Briggs; Matt Highland; Merea Bentrott; Rebecca Davis; Wendy Rickman; Jodi Tomlonovic; Martin Cannon; Kim Laube; Lindsay, Kelly; Julie Lovelady  
**Subject:** Re: Revised DRAFT FFP Report with data dictionary - response requested by Noon on Wednesday, November 29

Hi All,

Just a quick note and "heads up". I will be sending the next draft version of the FPP report on 11/27 and will be requesting (CORE/IME, ACFS, IDPH) first quarter data and SFY17 verification if provided or provide SFY17. Would like to have the data by 12/11 so that we can drop it into the FPP report and review on 12/15 (Oversight). I will send the format for data submission on the 27th.

Hope you have a great Thanksgiving!

Julie

On Thu, Nov 16, 2017 at 10:32 AM, Kane, Debbie <[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)> wrote:

Good day,

Attached is a revised FFP Report that includes the data dictionary (at the end of the document). In order to be prepared for the December 1st meeting, I ask you to submit your edits to me by noon on Wednesday, November 29th.

On another note, please watch your email for a doodle poll. Per our discussion at yesterday's meeting, the data group will need to meet in December - we will probably need 2 meetings.

Thanks,

Debbie

Debra J. Kane, PhD, RN, PHCNS-BC

MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention  
Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319  
P: 515.281.4952 | F: 515.725.1760 | [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)

*Promoting and Improving the Health of Iowans*

--  
Julie Allison, MPA

Child Care Bureau Chief

# HHS.gov

## Office of Population Affairs

---

U.S. Department of Health &amp; Human Services

## Performance Measures

### Contraceptive Care Measures

Forty-five percent of all pregnancies in the U.S. are unintended<sup>1</sup>. Increasing access to contraception is a proven strategy for reducing unintended pregnancy and achieving healthy spacing of births. Currently, an estimated 37.9 million women are in need of contraceptive services in the United States<sup>2</sup>. Women who wish to delay or prevent pregnancy should have access to a broad range of contraceptive methods, preferably on a same-day on-site basis. It is important that these contraceptive services are provided in a client-centered manner that treats each person as a unique individual with respect, empathy, and understanding. It is also important that these services provide accurate, easy-to-understand information based on the needs and goals identified by the client that reflect the client's preferences and values<sup>3</sup>. Efforts to provide client-centered contraceptive services as described above may be strengthened by quality improvement processes based on standardized measurement of the delivery of contraceptive care.

Previously, there have been no validated clinical performance measures for contraceptive care. To address this gap, the Office of Population Affairs (OPA) has developed contraceptive care measures that assess the provision of contraception to all women in need of contraceptive services. OPA's focus is to facilitate voluntary quality improvement activities in any setting that provides contraceptive care services. In November 2016, the National Quality Forum endorsed these measures. This is a significant step towards prioritizing and improving the quality of family planning care provided to women and men of reproductive age. In addition, OPA recently funded a three-year project to develop a patient-reported outcome performance measure, which will focus on filling another critical gap in performance measures (that is, the need for validated measures of client experience with contraceptive services). This patient-reported measure will complement the contraceptive care measures.

### Endorsed Measures

#### All Women

1. **Most & Moderately Effective Methods:** The percentage of women aged 15-44 at risk of unintended pregnancy that is provided a most effective (sterilization, implants, intrauterine devices or systems (IUD/IUS)) or moderately effective (injectables, oral pills, patch, ring, or diaphragm) contraceptive method (NQF #2903)
2. **Access to LARC:** The percentage of women aged 15-44 years at risk of unintended pregnancy that is provided a long-acting reversible contraceptive (LARC) method (implants or IUD/IUS) (NQF #2904)

#### Postpartum Women

3. Postpartum Most & Moderately Effective Methods: Among women aged 15-44 years who had a live birth, the percentage that is provided a most effective (sterilization, implants, IUD/IUS) or moderately effective (injectables, oral pills, patch, ring, or diaphragm) contraceptive methods within 3 and 60 days of delivery and Postpartum Access to LARC: Among women aged 15-44 years who had a live birth, the percentage that is provided a LARC method (implants or IUD/IUS) within 3 and 60 days of delivery (NQF #2902)

Overview of [Clinical Performance Measures of Contraceptive Care - PDF](#) (153 KB)

## Clinical Performance Measures Contraceptive Care Webinar

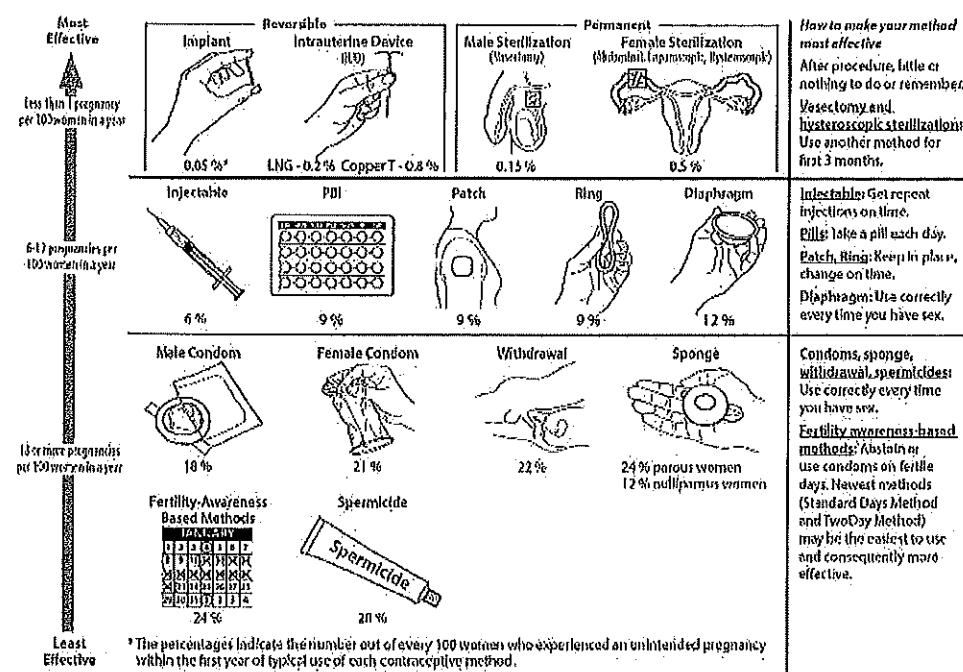
- [Download and listen to webinar](#) (WMV - 11.7 MB)
- [Read Transcript - PDF](#) (150 KB)

## Rationale for the Contraceptive Care Measures

Contraception is a highly effective clinical preventive service that can help women achieve their personal reproductive health goals, including preventing teen and unintended pregnancy and achieving healthy spacing of births. The type of contraceptive method used by a woman is strongly associated with her risk of unintended pregnancy and there is no single method that is right for everyone. Each woman and teen needs to have access to the full range of contraceptive methods in order to choose the method that is right for her and with which she can be successful in delaying or preventing pregnancy.

These performance measures for contraceptive care reflect the fact that some contraceptive methods are more effective than others at preventing unintended pregnancy, and are designed to encourage providers to offer the range of most and moderately effective methods.

Effectiveness is only one of many important aspects to consider in comparing contraceptive methods, but it has been shown to be of great importance to women who use contraception. A 2016 study asked 1,783 women in family planning and abortion clinics across the United States what characteristics of contraceptive methods were "extremely important" to them. Of 23 total items, the method's effectiveness at preventing pregnancy was the item that most (89%) women said was "extremely important." The next most important characteristics were the method is easy to get (81%), affordable (81%), and easy to use (80%)<sup>4</sup>. Many women also consider other characteristics, such as a method's potential side effects and non-contraceptive benefits, as well as partner preferences and peer experiences, during selection.



**CONDOMS SHOULD ALWAYS BE USED TO REDUCE THE RISK OF SEXUALLY TRANSMITTED INFECTIONS.**

#### Other Methods of Contraception

**Latational Amenorrhea Method:** LAM is a highly effective, temporary method of contraception.

**Emergency Contraception:** Emergency contraceptive pills or a copper IUD after unprotected intercourse substantially reduces risk of pregnancy.

Adapted from WHO's Family Planning: A Global Handbook for Providers (2001) and Trussell et al (2011).

#### text-only version

The use of these performance measures will increase women's access to contraception in two main ways:

1. More providers will start asking women and men about their pregnancy intention in order to determine their need for services to meet their reproductive goals, whether those goals be preventing, delaying, or achieving pregnancy.
2. For clients who wish to delay or prevent pregnancy, more providers will follow Centers for Disease Control and Prevention (CDC)/OPA recommendations to inform women about the availability of a wide range of contraceptive methods, conduct a brief assessment to identify those contraceptive methods that are safe for the client, offer client-centered counseling in a way that respects the client's preferences, and provide the client with her chosen contraceptive method(s), ensuring that a wide range of methods are readily available to the client, preferably on a same-day on-site basis.

CDC and OPA recommendations describe how to provide contraceptive services in a safe, effective and client-centered manner.

- [Providing Quality Family Planning Services \(QFP\)](#)
- [United States Medical Eligibility Criteria \(US MEC\) for Contraceptive Use, 2016](#)
- [U.S. Selected Practice Recommendations \(US SPR\) for Contraceptive Use, 2016](#)

## How the Measure Should be Used

A specific benchmark has not been set for the *Contraceptive Care - Most & Moderately Effective Methods* measure, and OPA does not expect it to reach 100%, as some women will make informed decisions to choose methods in the lower tier of efficacy even when offered the full range of methods. The goal of providing contraception should never be to promote any one method or class of methods over women's individuals choices.

The *Contraceptive Care – Access to LARC* measure should be used to identify women who have very limited or no access to LARC methods, which are more commonly inaccessible than other methods. For example, reporting units with less than 1-2% use or rates well below the mean may signal the presence of barriers to LARC provision. The *Contraceptive Care – Access to LARC* measure should not be used to encourage high rates of use, as this could lead to coercive practices related to contraception and sterilization, especially practices targeting racial/ethnic minorities and low-income individuals. For this same reason, it is not appropriate to use the *Contraceptive Care – Access to LARC* measure in a pay-for-performance context.

<sup>1</sup> Finer, L.B. and Zolna, M.R. (2016). Declines in unintended pregnancy in the United States, 2008-2011. *New Engl J Med*, 374(9), 843-52.

<sup>2</sup> Frost, J.J., Frohwirth, L., and Zolna, M.R. (2015). Contraceptive needs and services, 2013 update. New York: Guttmacher Institute.

<sup>3</sup> Gavin, L., Moskosky, S., Carter, M., Curtis, K., Glass, E., Godfrey, E., Marcell, A., Mautone Smith, N., Pazol, K., Tepper, N., Zapata, L. Providing quality family planning services: Recommendations of CDC and the U.S. Office of Population Affairs. *MMWR Recomm Rep*. 2014; 63(RR-04):1-54.

<sup>4</sup> Jackson, A.V., Karasek, D., Dehlendorf, C., and Foster, D.G. (2016). Racial and ethnic differences in women's preferences for features of contraceptive methods. *Contraception*, 93(5), 406-11.

Content created by Office of Population Affairs

Content last reviewed on March 15, 2017

## Highland, Matt

---

**From:** FPCI <jtomlonovic@fpcouncil.com>  
**Sent:** Thursday, November 16, 2017 3:36 PM  
**To:** debbie.kane@idph.iowa.gov  
**Cc:** mhighla@dhs.state.ia.us; wsigns@dhs.state.ia.us; mbentro@dhs.state.ia.us; jhenry@dhs.state.ia.us; djohnso6@dhs.state.ia.us; denise.wheeler@idph.iowa.gov; klaube@lfsiowa.org; jennifer.warren-ulrick@ppheartland.org; mbriggs@dhs.state.ia.us; Martin Cannon; rdavis@dhs.state.ia.us; jalliso1@dhs.state.ia.us; wrickma@dhs.state.ia.us  
**Subject:** Re: Invitation: FPP data work group @ Fri Dec 1, 2017 9pm - 10:30pm  
(jtomlonovic@fpcouncil.com)

Debbie. I enjoy working with you all but not enough that I want to be with you from 9-10:30 on that Friday night. Is this from 3-4:30?

Thanks  
Jodi

Sent from my iPhone

On Nov 16, 2017, at 3:30 PM, [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov) wrote:

[more details »](#)

### FPP data work group

This will be a meeting of the data work group rather than the full group. We will meet in Room 128  
When Fri Dec 1, 2017 9pm – 10:30pm Coordinated Universal Time

Where Iowa Medicaid Enterprises, 100 Army Post Rd, Des Moines, IA 50315, USA ([map](#))

Calendar [jtomlonovic@fpcouncil.com](mailto:jtomlonovic@fpcouncil.com)

Who

- [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov) - organizer
- [mhighla@dhs.state.ia.us](mailto:mhighla@dhs.state.ia.us)
- [wsigns@dhs.state.ia.us](mailto:wsigns@dhs.state.ia.us)
- [mbentro@dhs.state.ia.us](mailto:mbentro@dhs.state.ia.us)
- [jhenry@dhs.state.ia.us](mailto:jhenry@dhs.state.ia.us)
- [jtomlonovic@fpcouncil.com](mailto:jtomlonovic@fpcouncil.com)
- [djohnso6@dhs.state.ia.us](mailto:djohnso6@dhs.state.ia.us)
- [denise.wheeler@idph.iowa.gov](mailto:denise.wheeler@idph.iowa.gov)
- [klaube@lfsiowa.org](mailto:klaube@lfsiowa.org)
- [jennifer.warren-ulrick@ppheartland.org](mailto:jennifer.warren-ulrick@ppheartland.org)
- [mbriggs@dhs.state.ia.us](mailto:mbriggs@dhs.state.ia.us)
- Martin Cannon
- [rdavis@dhs.state.ia.us](mailto:rdavis@dhs.state.ia.us)
- [jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)
- [wrickma@dhs.state.ia.us](mailto:wrickma@dhs.state.ia.us)

Going? [Yes](#) - [Maybe](#) - [No](#) [more options »](#)

**Highland, Matt**

---

**From:** Allison, Julie A. <jalliso1@dhs.state.ia.us>  
**Sent:** Thursday, November 16, 2017 2:17 PM  
**To:** Jenine R. Henry  
**Cc:** Wendy Rickman  
**Subject:** Re: FPP meeting scheduled for 12/1

FYI- Wendy

On Thu, Nov 16, 2017 at 2:16 PM, Allison, Julie A. <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)> wrote:  
Can you move the oversight meeting on 12/1 to 12/15 (IME, need a room from 3-4:30)  
Wendy- I checked in with Kim, Jodi and Denise- all can make it on the 15th also.  
Please keep the room for the 12/1 meeting as we will still be using just not for this particular group of folks.

--

Julie Allison, MPA

Child Care Bureau Chief

Iowa Department of Human Services/Division of Adult, Children and Family Services

1305 East Walnut, Hoover State Office Bldg., 5<sup>th</sup> floor, Des Moines, Ia. 50319-0114

Phone: 1-515-281-6177

Fax: 515-281-6248

--

Julie Allison, MPA

Child Care Bureau Chief

Iowa Department of Human Services/Division of Adult, Children and Family Services

1305 East Walnut, Hoover State Office Bldg., 5<sup>th</sup> floor, Des Moines, Ia. 50319-0114

Phone: 1-515-281-6177

Fax: 515-281-6248

## Highland, Matt

---

**From:** Kane, Debbie <[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)>  
**Sent:** Thursday, November 16, 2017 10:33 AM  
**To:** Deborah Johnson; Denise Wheeler; George Signs; Jennifer Warren-Ulrick; Julie A. Allison; Matt Briggs; Matt Highland; Merea Bentrott; Rebecca Davis; Wendy Rickman; Jodi Tomlonovic; Martin Cannon; Kim Laube  
**Subject:** Revised DRAFT FFP Report with data dictionary - response requested by Noon on Wednesday, November 29  
**Attachments:** FFP Report 2017 v5.docx

Good day,

Attached is a revised FFP Report that includes the data dictionary (at the end of the document). In order to be prepared for the December 1st meeting, I ask you to submit your edits to me by noon on Wednesday, November 29th.

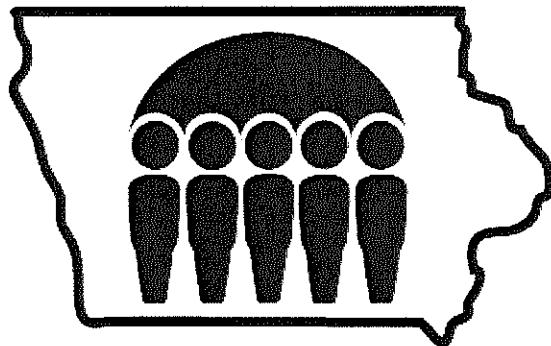
On another note, please watch your email for a doodle poll. Per our discussion at yesterday's meeting, the data group will need to meet in December - we will probably need 2 meetings.

Thanks,  
Debbie

Debra J. Kane, PhD, RN, PHCNS-BC  
MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention  
Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319  
P: 515.281.4952 | F: 515.725.1760 | [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)

*Promoting and Improving the Health of Iowans*

# Iowa Department of Human Services



## ***Family Planning Program***

*Previously Iowa Family Planning Waiver*

October 2017

## Report Summary: Family Planning Program

### Background

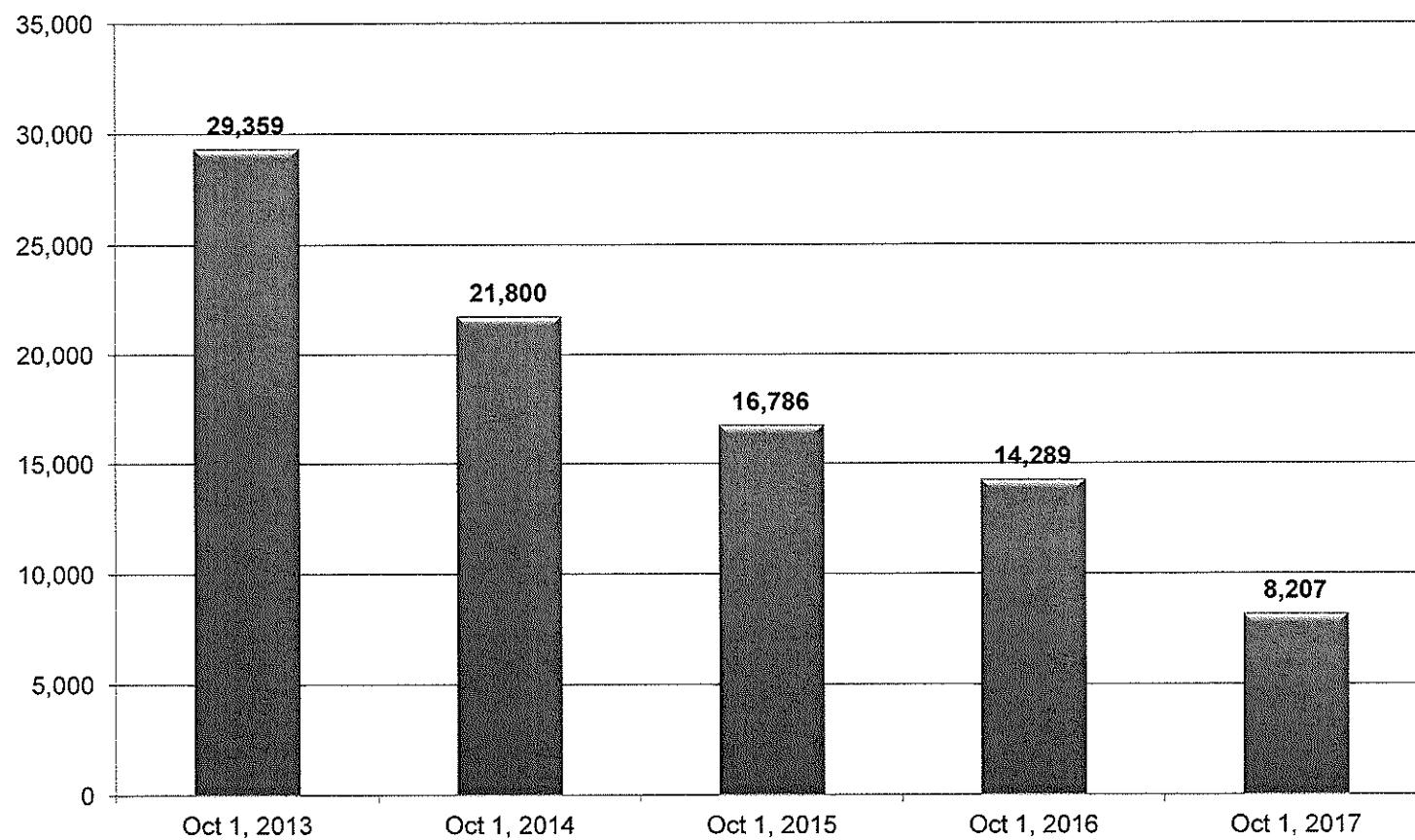
The Family Planning Program (FPP) is for men and women who are 12-54 years of age. The FPP helps with the cost of family planning related services. The FPP is a state-funded DHS program which replaced the Iowa Family Planning Network (IFPN) program. Eligibility and covered benefits did not change. The location where members receive services may have changed. As of July 1, 2017, eligible IFPN members transitioned to the FPP. This program allows men and women to get family planning services only. This program is a form of limited insurance coverage. It does not meet the Affordable Care Act requirements for a minimum essential benefits plan.

### Data Limitations/Considerations

The FPP and IFPN are programs with limited benefits and declining enrollment due to increased health care coverage, as FPP and IFPN do not meet the Affordable Care Act (ACA) definition of 'minimal essential coverage.'

It is important to note that data are collected from in a variety of systems, including eligibility and claims systems. With the recent transition to managed care and the transition from IFPN to the FPP, data may not have been collected in the exact same way, due to differences in claims processing, etc. A work group was assembled to ensure we're accounting for these changes and how they impact the data. The data workgroup developed a data dictionary for the data elements reported in this document. It is located here.

**Figure 1. Number of Enrolled Members**

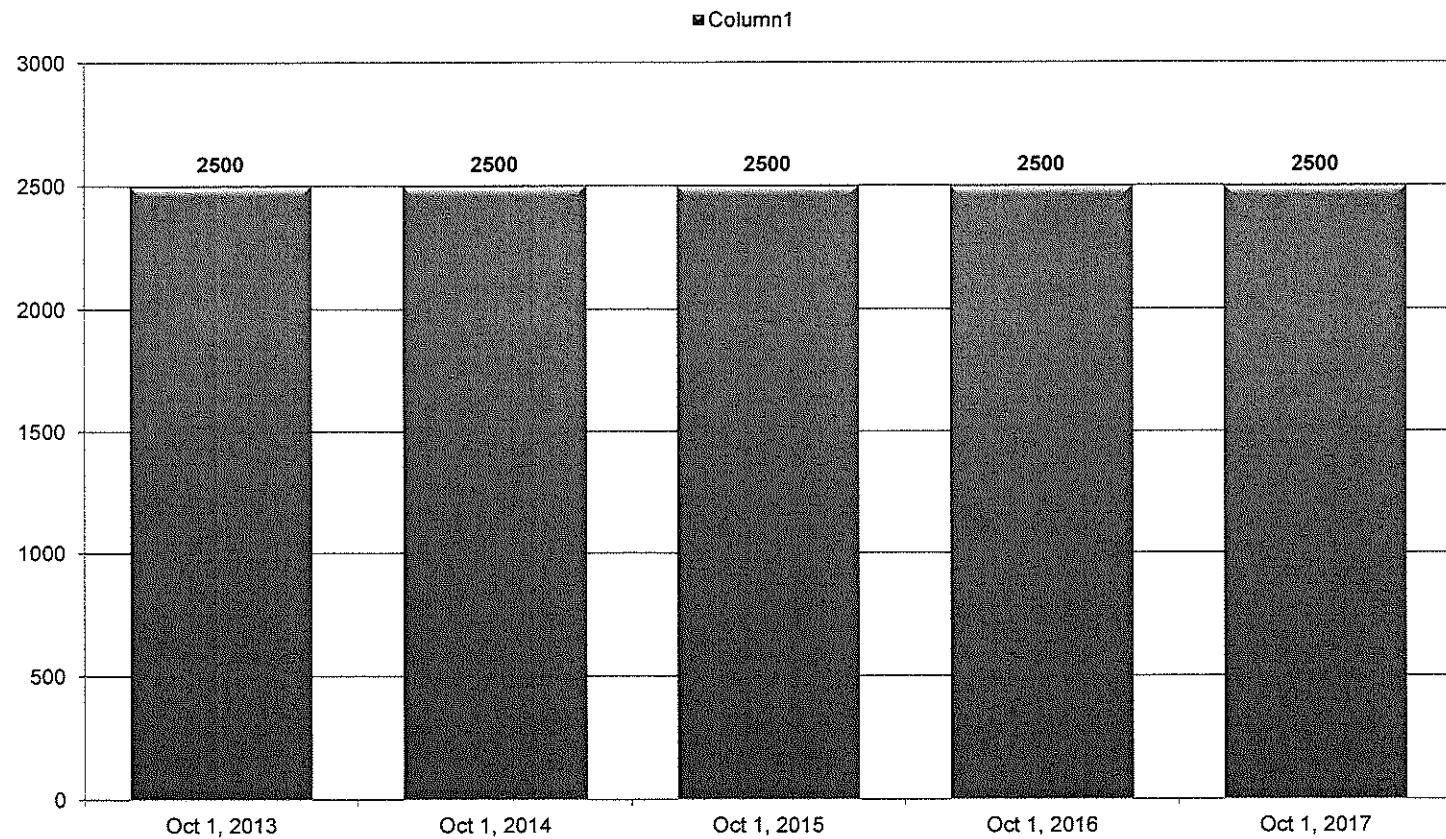


*Unduplicated Enrolled Members' Numbers*

*Data Source: Monthly Medicaid Eligibility Report Mars Report IAMM3700-R001, R002, R003 from MMIS*

*The FPP and IFPN are programs with limited benefits and declining enrollment due to increased health care coverage, as FPP and IFPN do not meet the Affordable Care Act (ACA) definition of 'minimal essential coverage.'*

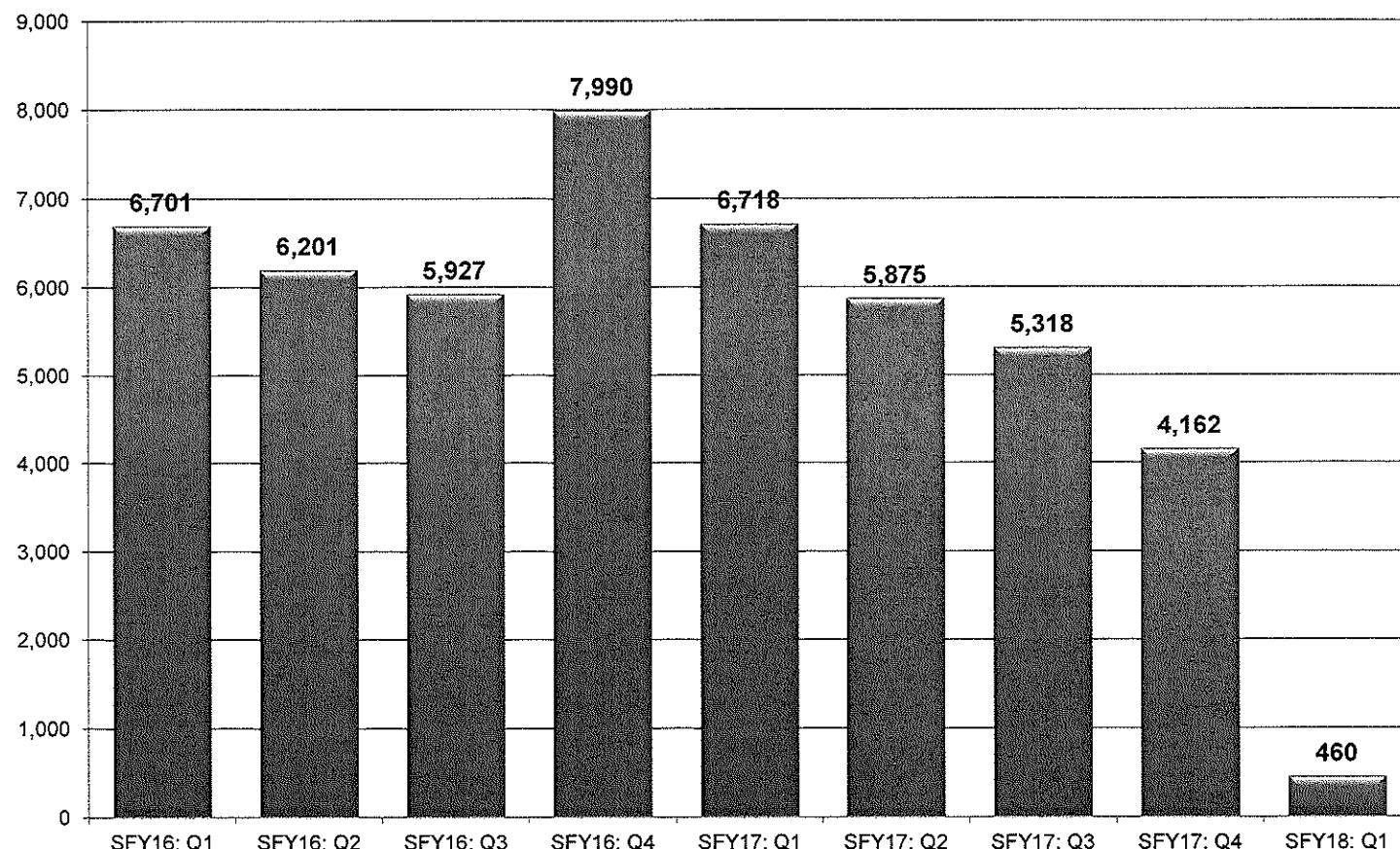
**Figure 2. Confidential Enrolled FFP Members**



Data Source: FPP Eligibility System

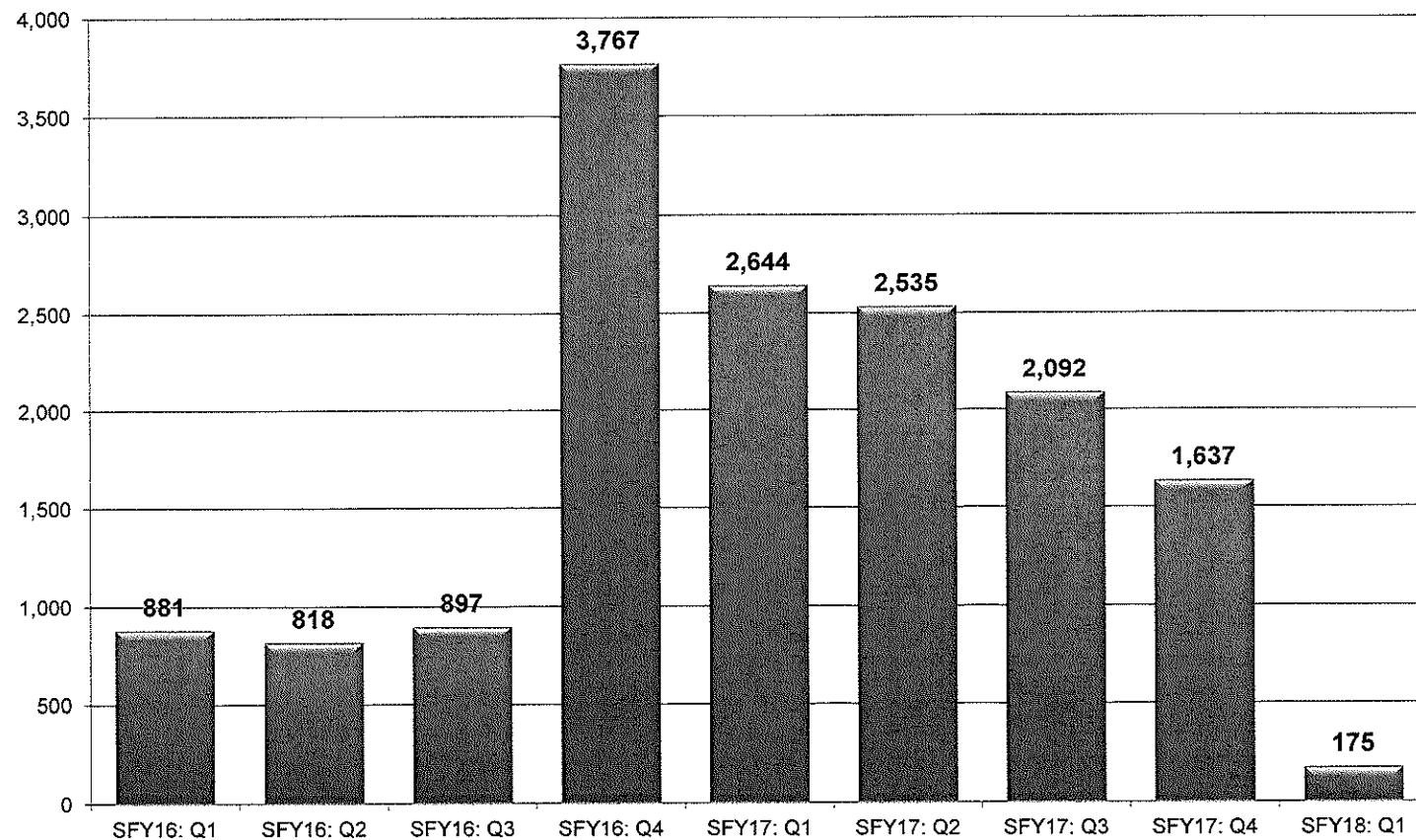
Duplicated Enrolled Members' Numbers (may include members enrolled in Medicaid due to a pregnancy ending)

**Figure 3. Services Accessed by Members**



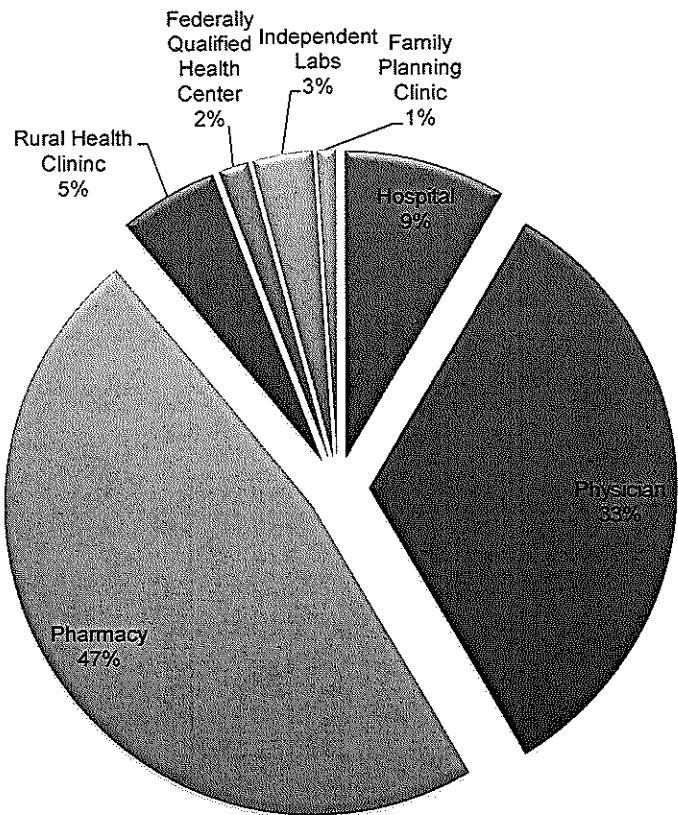
*Data Source: Core Ad Hoc Report/Query*

**Figure 4. Unique Provider Count**



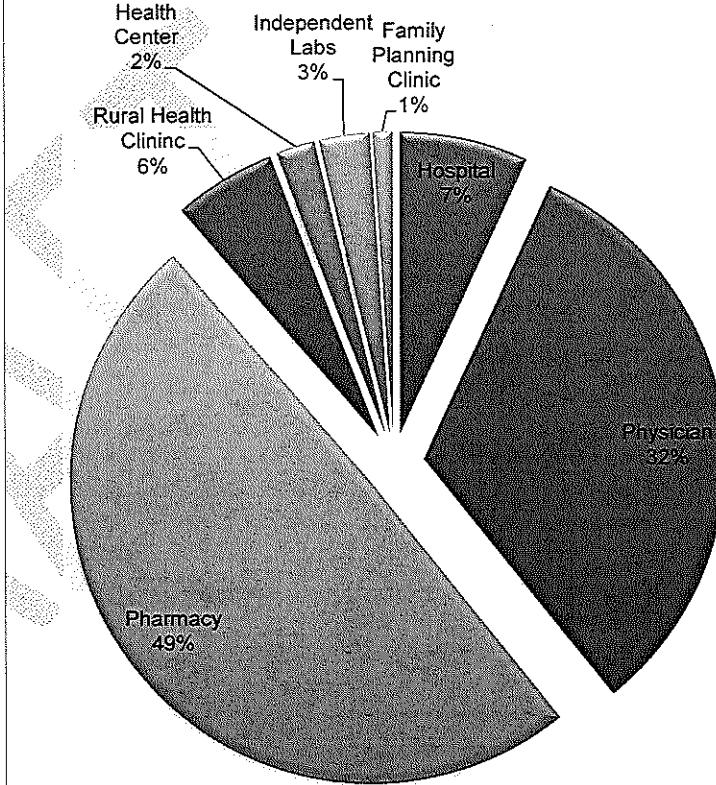
Data Source: Core Ad Hoc Report/Query

**Figure 5. Provider Participation SFY17: Q2**



Data Source: DDM

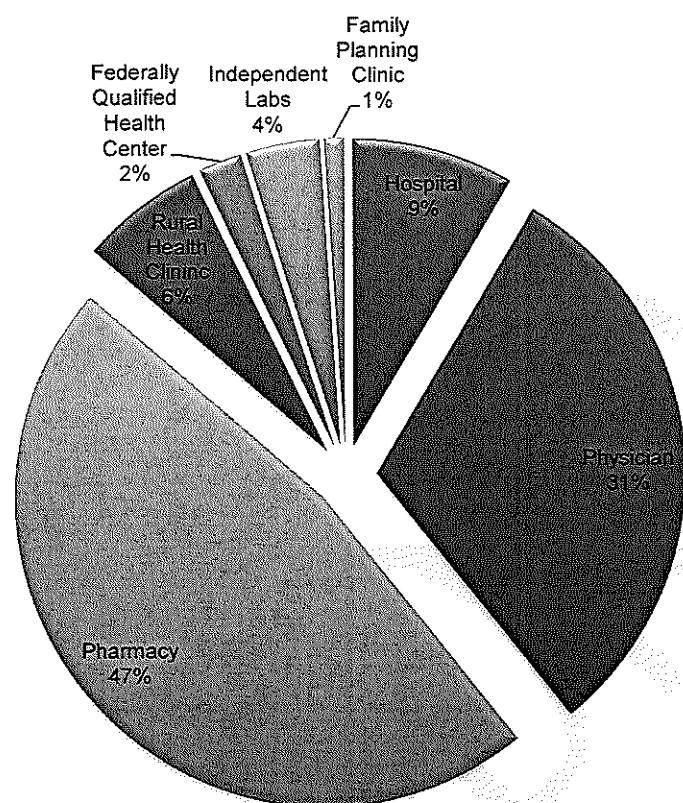
**Figure 6. Provider Participation SFY17: Q3**



Data Source: DDM

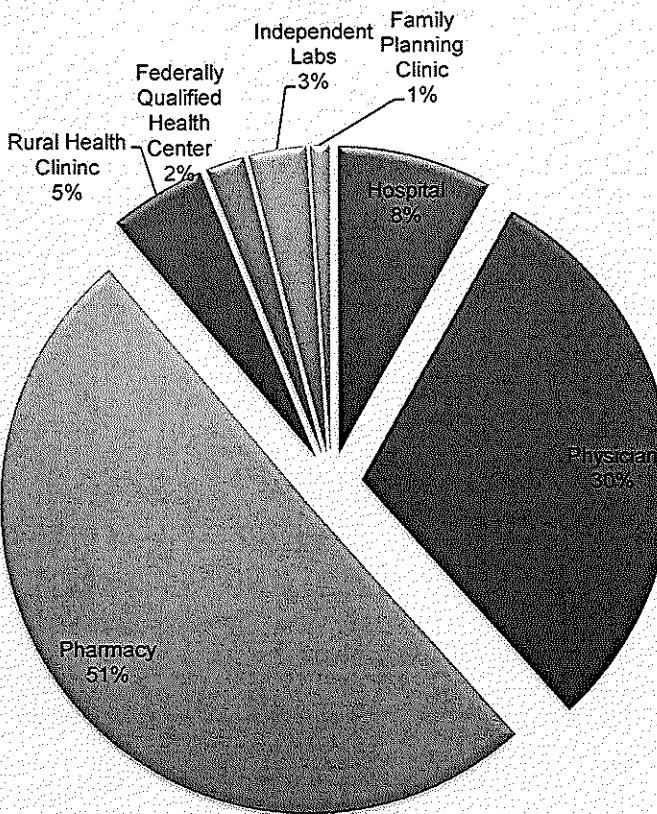
Comment [KD1]: Clinic is misspelled on pages 6 and 7.

**Figure 7. Provider Participation SFY17: Q4**



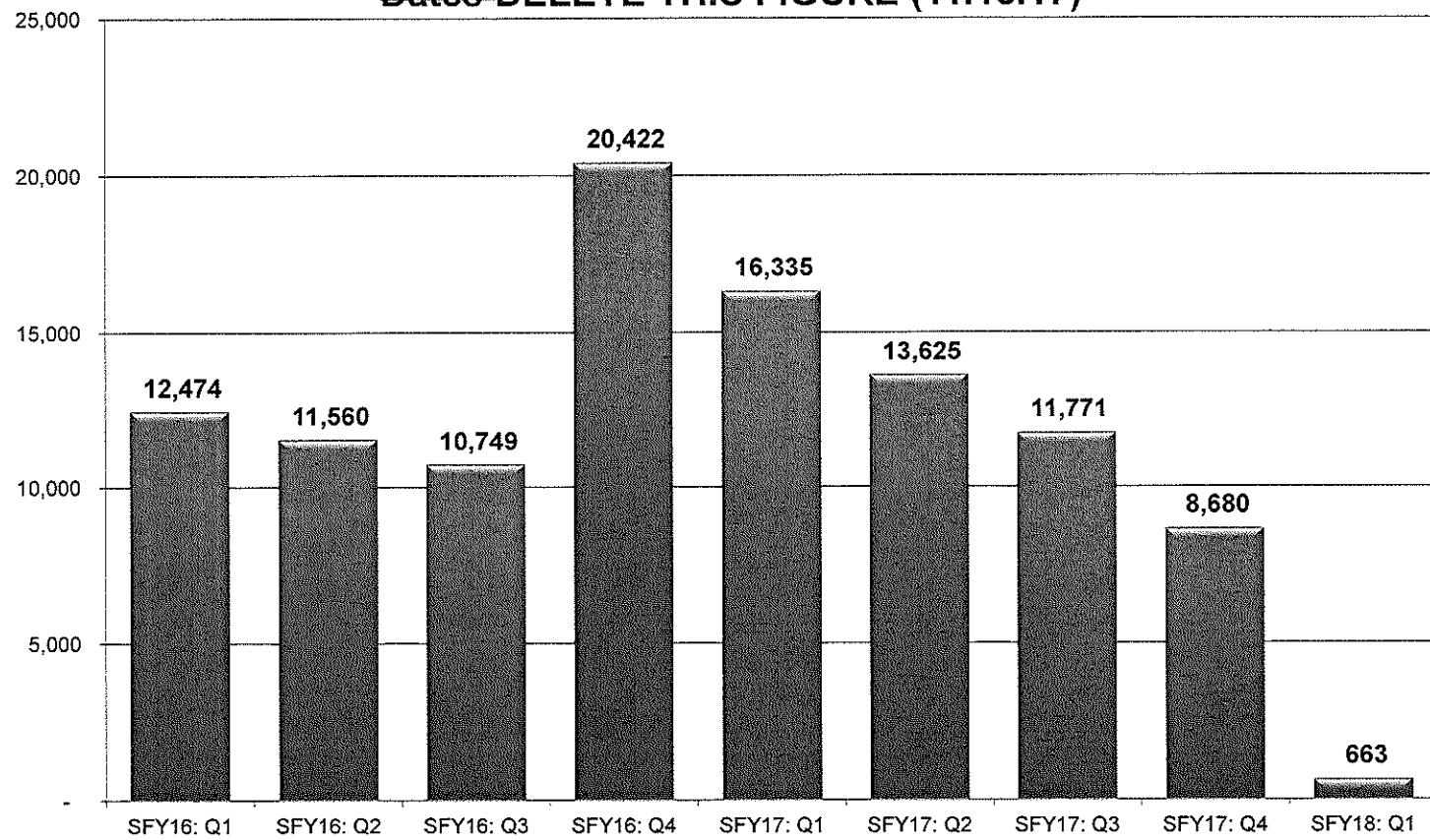
*Data Source: DDM*

**Figure 8. Provider Participation SFY18: Q1**



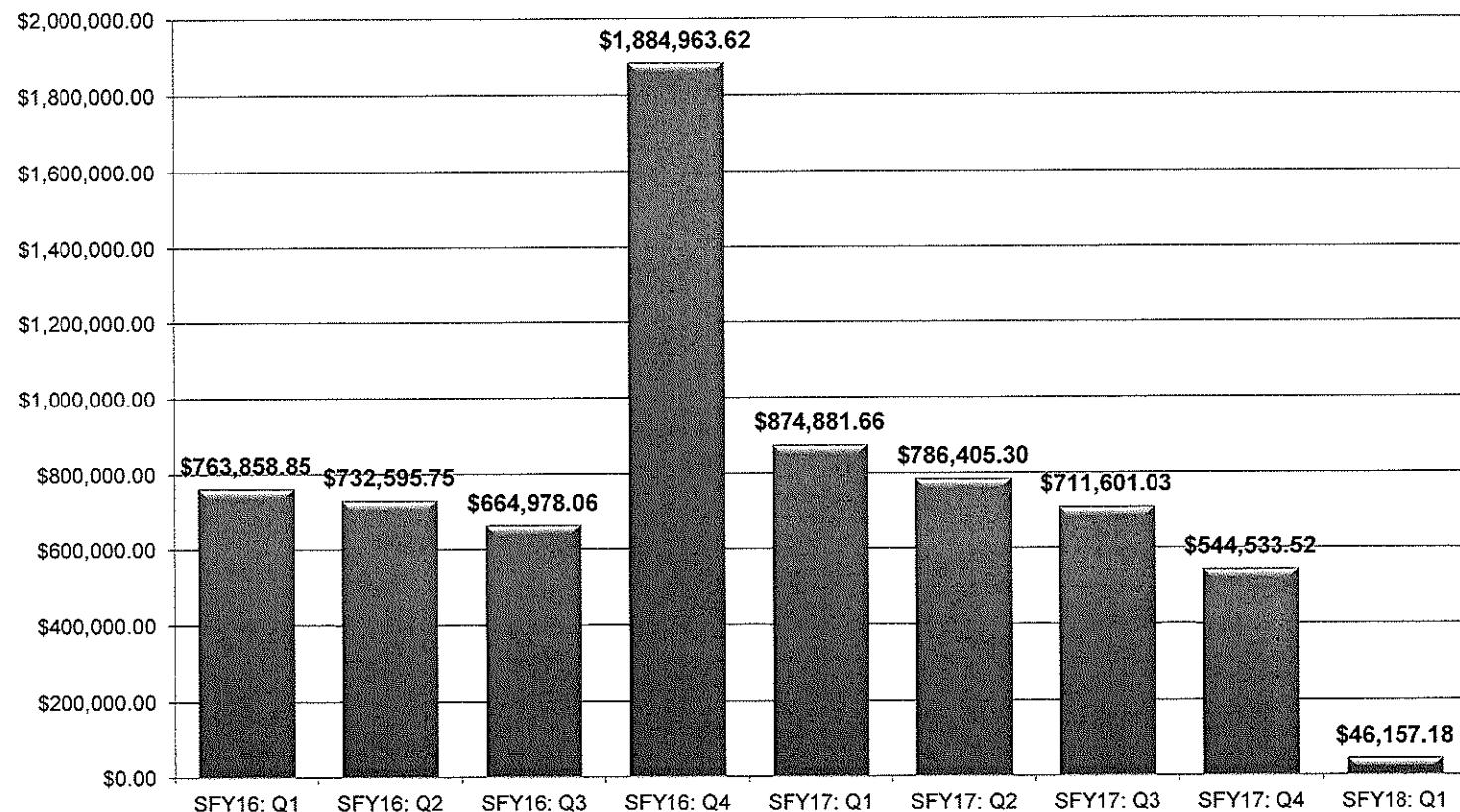
*Data Source: DDM*

**Figure 9. Count of Paid Claims Based on Claims Payment Dates** ~~DELETE THIS FIGURE (11.15.17)~~



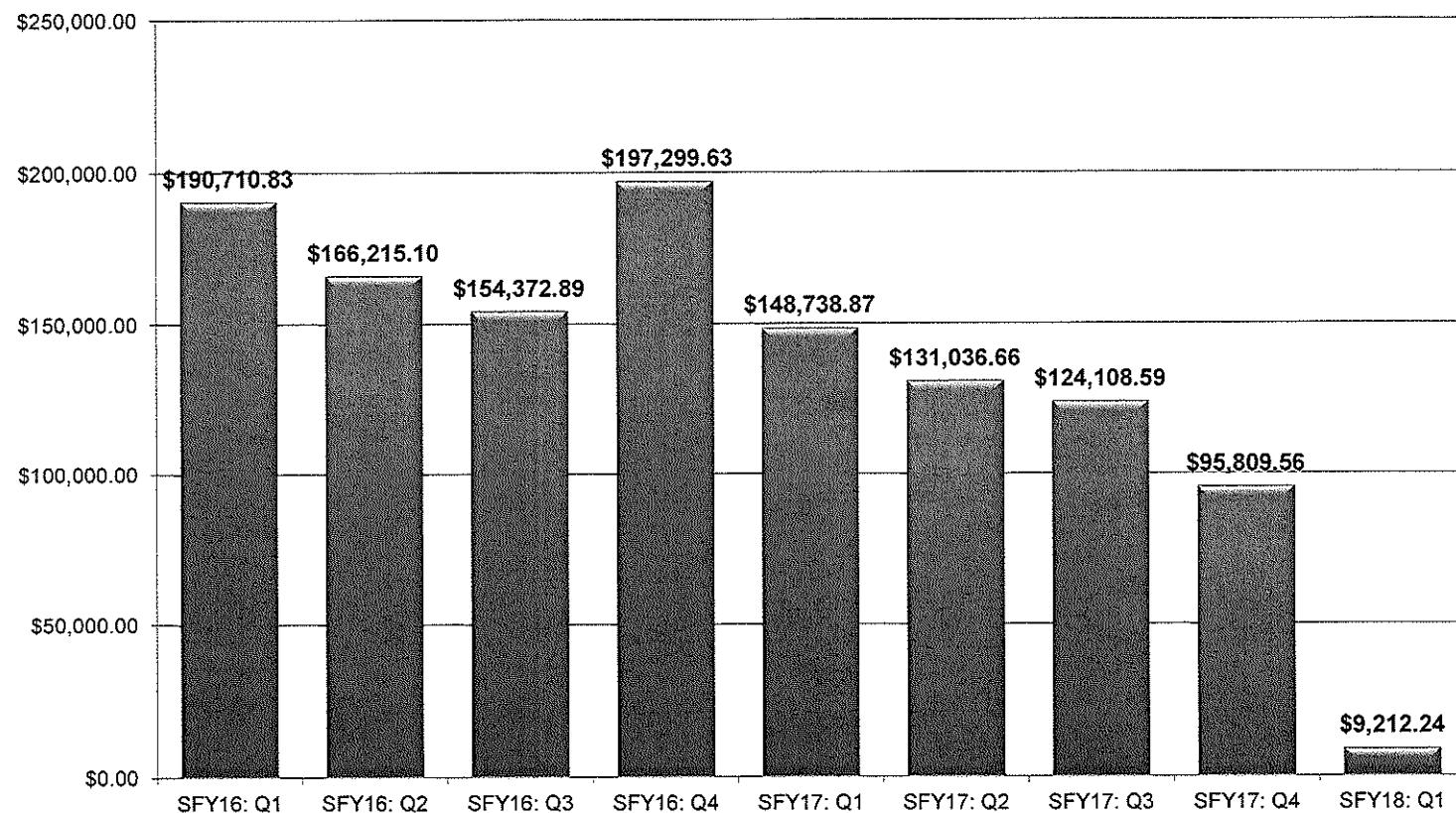
*Data Source: Core Ad Hoc Report/Query*

**Figure 10. Reimbursement of Services**



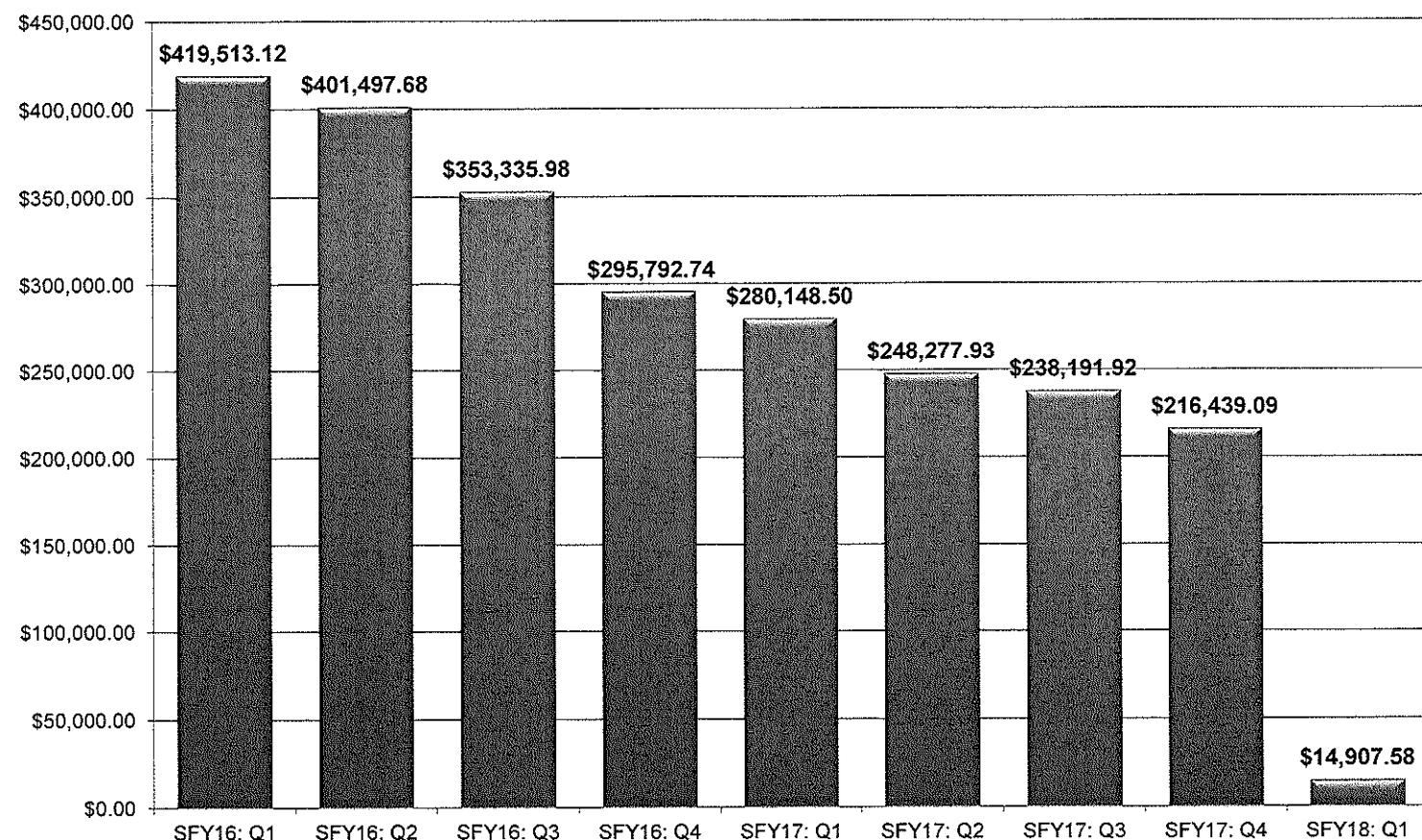
*Data Source: Core Ad Hoc Report/Query*

**Figure 11. Payments for Office Visits**



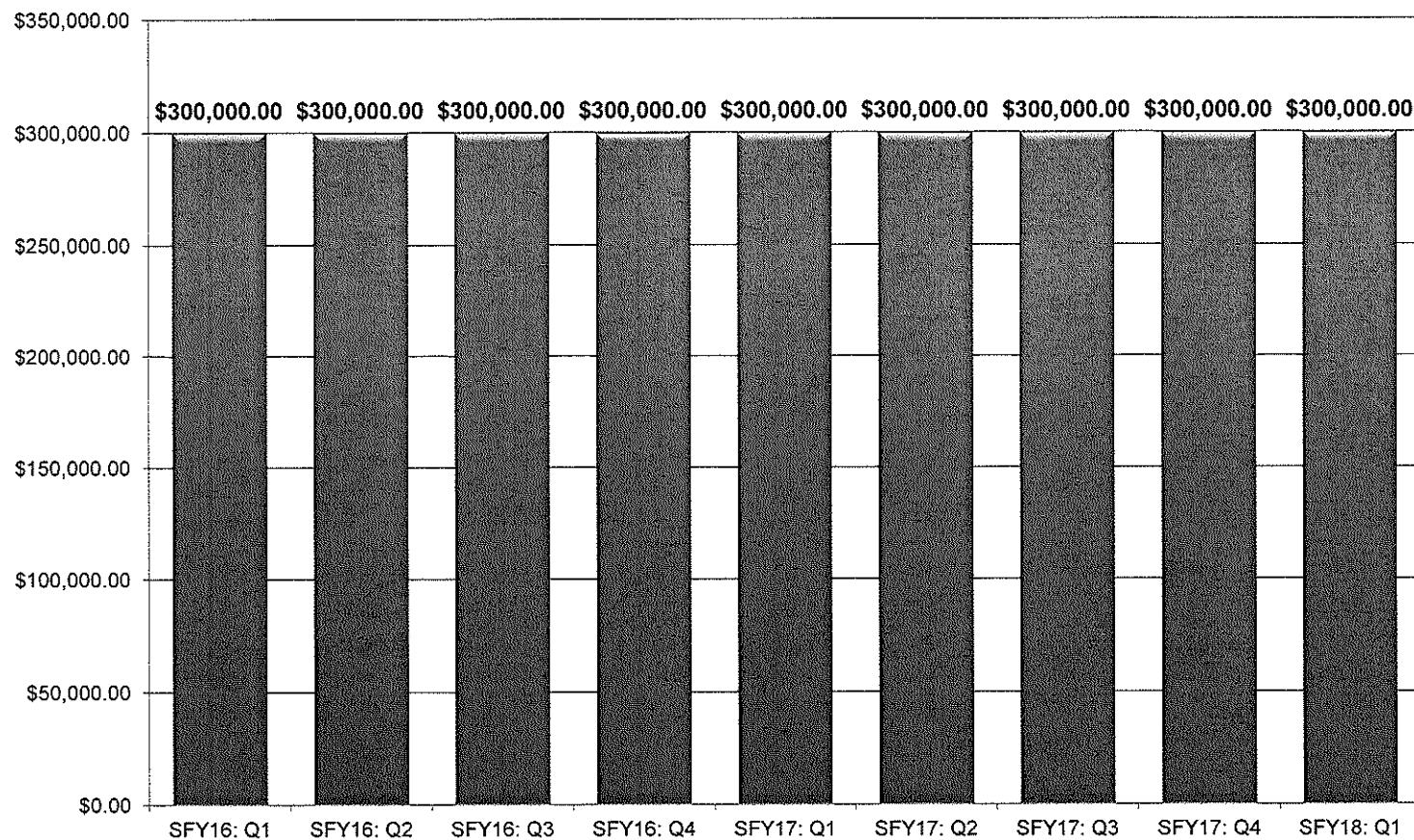
*Data Source: Core Ad Hoc Report/Query*

**Figure 12. Payments for Contraceptive Services**



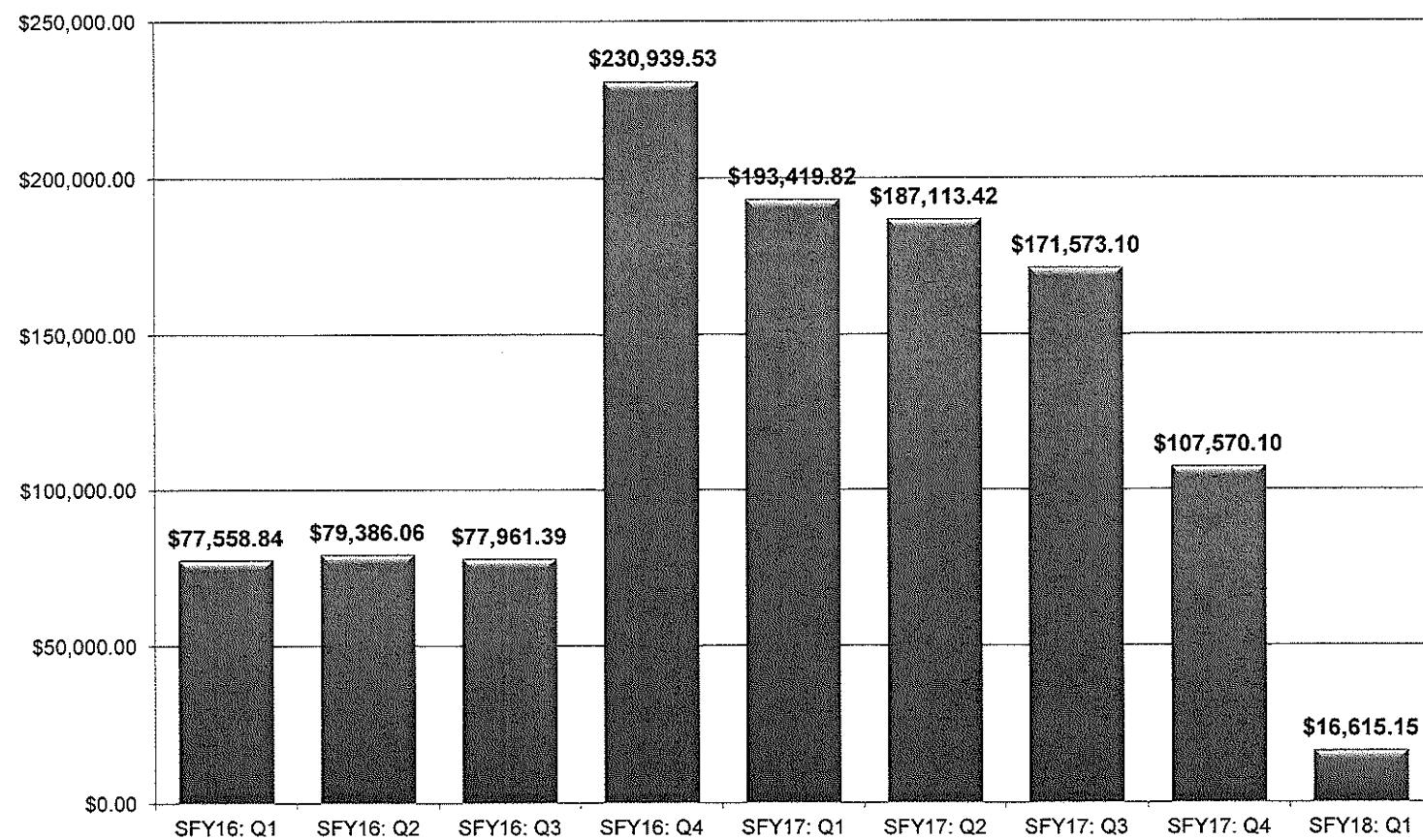
*Data Source: Core Ad Hoc Report/Query*

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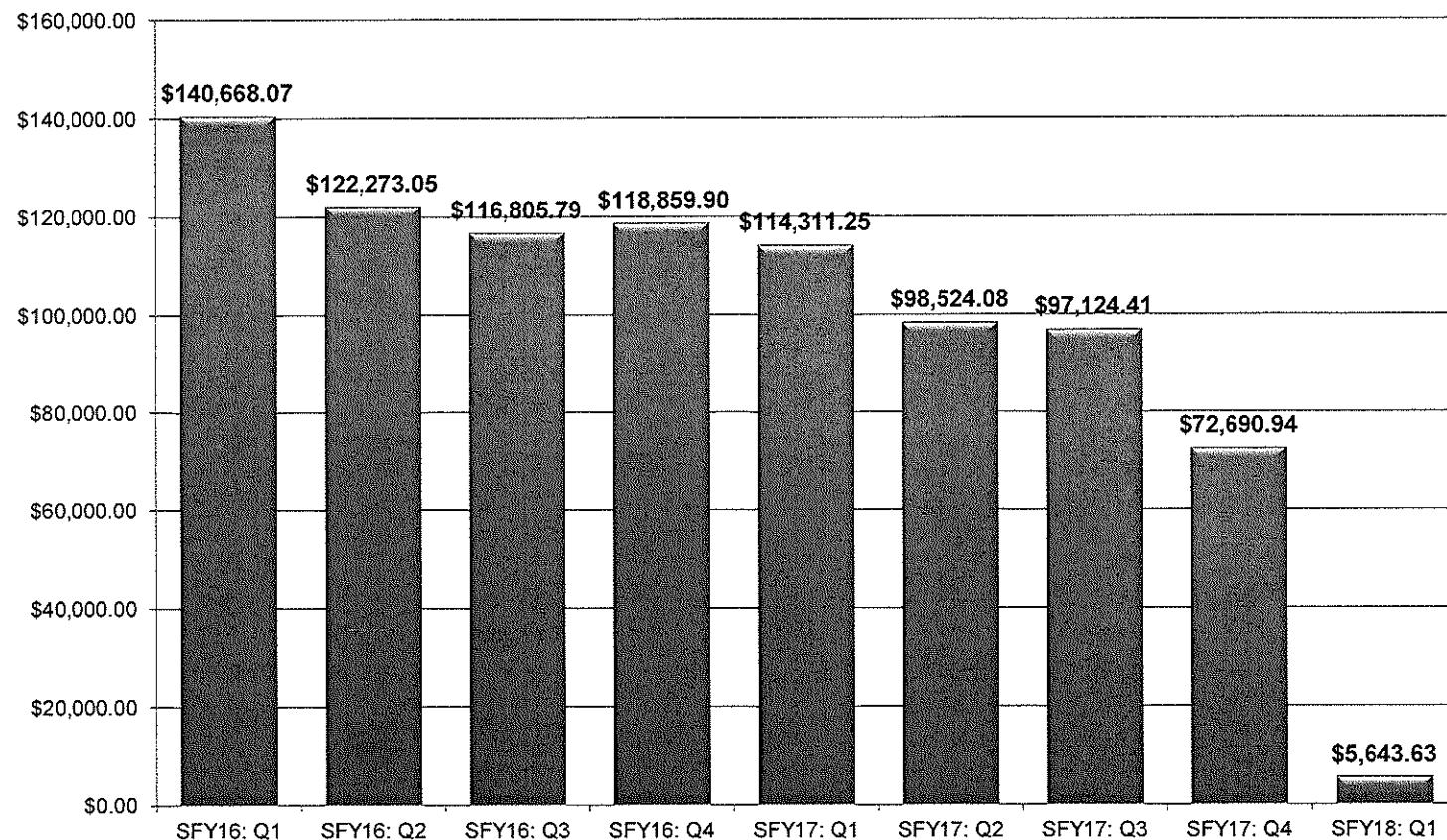
*Data Source: Core Ad Hoc Report/Query*

**Figure 14. Pharmacy Payments**



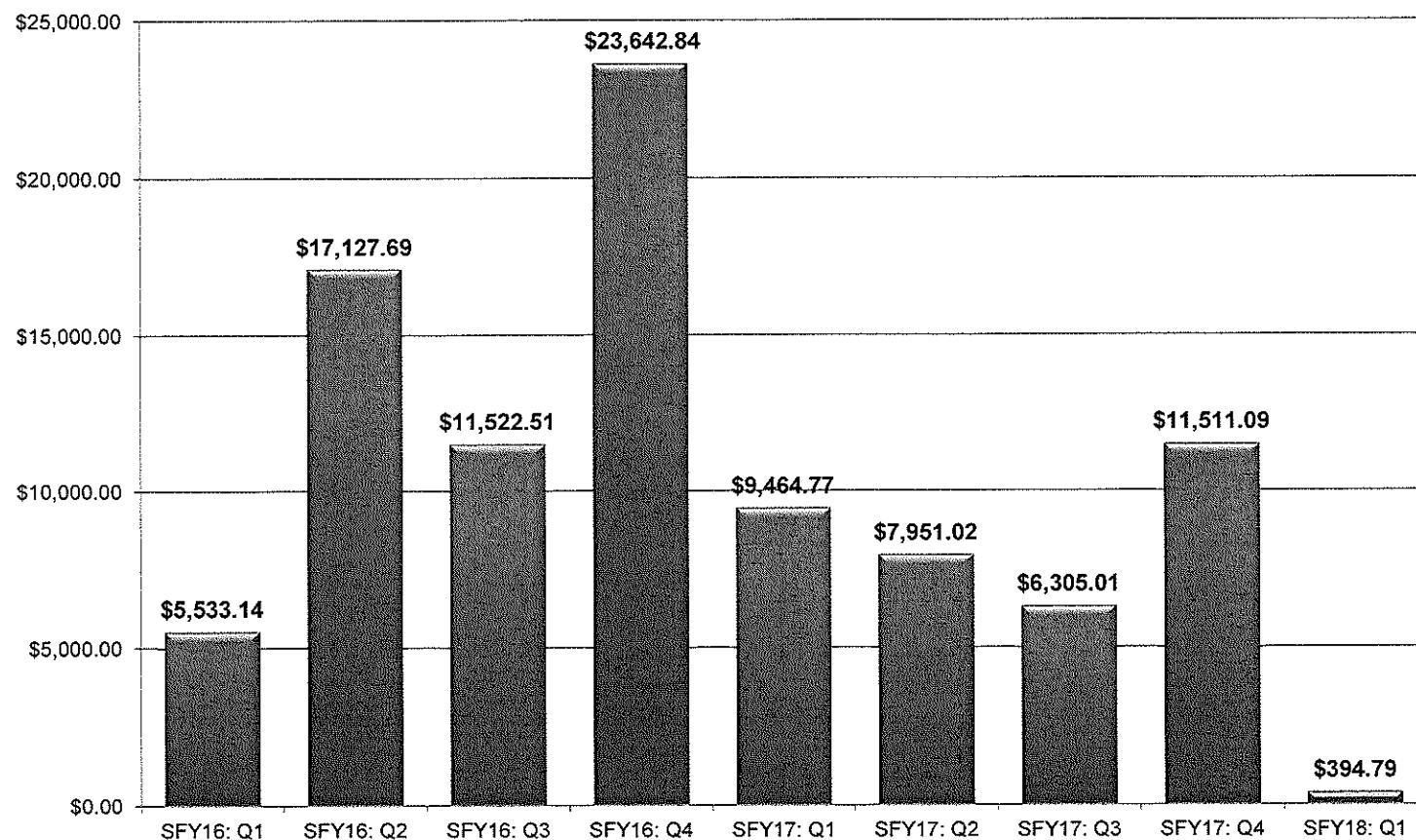
*Data Source: Core Ad Hoc Report/Query*

**Figure 15. Payments for Labs and X-rays**



*Data Source: Core Ad Hoc Report/Query*

**Figure 16. Payments for Surgical Services**



*Data Source: Core Ad Hoc Report/Query*

## Data dictionary

### Key Terms and abbreviations:

MMIS

Mars

SFY – State fiscal year (July 1 – June 30)

### Figure 1. Number of enrolled members

Data Source: Monthly Medicaid Eligibility Report Mars Report IAMM3700-R001, R002, R003 from MMIS

Abstract: This data source contains an unduplicated count of all persons who meet program eligibility criteria and have enrolled in the Iowa Family Planning Waiver (10.01.13 – 06.30.17) or in the Family Planning Program (07.01.17 to present). Enrolled persons may not have yet obtained services.

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Comment [DW3]: Do we need anything about confidential services/members?

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Abstract: Percentage of unique providers and provider types based on unique counts

Comment [KD6]: Need to spell out – define DDM

Comment [DW7]: Department of Data Management?

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Data source: DDM

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~~Figure 9. Count of paid claims submitted by and reimbursed to IFPN or FPP providers At 11.15.17 meeting decided to delete Figure 9~~

~~Data source: Core Ad Hoc Report/Query~~

Comment [KD8]: What is the data source?  
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Comment [KD9]: Recommended edit.

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Data source: Core Ad Hoc Report/Query

Abstract: Sum of dollar value for reimbursement of services for office visits only. These reimbursement amounts include: preventive visits, contraceptive method review and follow-up, IUD and implant insertions, as well as other procedures related to the office visit. These sums exclude....

Comment [KD10]: Are these categories of reimbursement mutually exclusive?

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Data source: Core Ad Hoc Report/Query

Abstract: Sum of dollar value for reimbursement of contraceptive services. These reimbursement amounts include: list of services. These reimbursement amounts exclude: list of services.

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Data source: Core Ad Hoc Report/Query

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## **Highland, Matt**

---

**From:** Kane, Debbie <[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)>  
**Sent:** Wednesday, November 15, 2017 10:22 AM  
**To:** Deborah Johnson; Denise Wheeler; George Signs; Jennifer Warren-Ulrick; Julie A. Allison; Kim Laube; Matt Briggs; Matt Highland; Merea Bentrott; Rebecca Davis; Wendy Rickman; Jodi Tomlonovic; Martin Cannon  
**Subject:** Draft data dictionary  
**Attachments:** FFP Report 2017 v4 (add data dictionary) (1).docx

Good day,

Attached is a first run at creating a data dictionary. I included a few questions and Denise Wheeler added some comments. I welcome your feedback.

See you later today.

Debbie

Debra J. Kane, PhD, RN, PHCNS-BC

MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention  
Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319  
P: 515.281.4952 | F: 515.725.1760 | [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)

*Promoting and Improving the Health of Iowans*

## Highland, Matt

---

**From:** Allison, Julie A. <jalliso1@dhs.state.ia.us>  
**Sent:** Wednesday, November 15, 2017 9:48 AM  
**To:** Johnson, Deborah  
**Cc:** Julie Lovelady; Matt Highland; Wendy Rickman  
**Subject:** Re: Contraceptive measures by quarter

yes makes sense.

On Wed, Nov 15, 2017 at 9:38 AM, Johnson, Deborah <[djohnso6@dhs.state.ia.us](mailto:djohnso6@dhs.state.ia.us)> wrote:  
Just FYI, in our system we always had claims deny which were then captured in the month they eventually paid so it basically comes out evenly throughout the year. (not sure if that makes sense). If we didn't pay for something not sure we should count it? But it may explain some unevenness in the data during the phase in, this is not untypical for any new program/service that is paid by Medicaid.

Deborah Johnson  
Bureau Chief Policy  
Iowa Medicaid Enterprise  
(515) 256-4662 (Office)  
(515) 782-6162 (Cell)  
(515) 256-1360 (Fax)  
[djohnso6@dhs.state.ia.us](mailto:djohnso6@dhs.state.ia.us)

On Wed, Nov 15, 2017 at 9:05 AM, Allison, Julie A. <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)> wrote:  
Not sure where you stand on paid claims but we need to articulate why paid claims are accurate vs. claims submitted as this keeps coming up.

----- Forwarded message -----

From: Wheeler, Denise <[denise.wheeler@idph.iowa.gov](mailto:denise.wheeler@idph.iowa.gov)>  
Date: Wed, Nov 15, 2017 at 8:56 AM  
Subject: Re: Contraceptive measures by quarter  
To: "Kane, Debbie" <[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)>  
Cc: "Julie A. Allison" <[jalliso1@dhs.state.ia.us](mailto:jalliso1@dhs.state.ia.us)>

I'm gonna need more Kleenex!

But again begs the question of paid claims versus claims filed. I know we used paid claims in the past, but I believe the difference is that IME was reliable about paying claims they were responsible for in a timely way. The Title X clinics, at least, are not having that experience with the MCOs.

Denise Wheeler, MS, CNM, ARNP

Family Planning Coordinator, Bureau of Family Health | Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319 | P: 515.321.8159 | F: 515.725.1760 | [denise.wheeler@idph.iowa.gov](mailto:denise.wheeler@idph.iowa.gov)

*Protecting and Improving the Health of Iowans*

On Tue, Nov 14, 2017 at 4:17 PM, Kane, Debbie <[debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)> wrote:

Good day,

I wanted to give you a heads-up on the data results I will present tomorrow...probably supports what you already have know. This result is the percent of women who obtained a most or moderately effective contraceptive method by state fiscal year 2016 - 2017:

3rd Quarter SFY 2016 (Jan - March 2016): 86.7% [n=2,367]

4th Quarter SFY 2016 (April - June 2016): 34.3% [n=777]

1st Quarter SFY 2017 (July - Sep 2016): 34.5% [n=237]

2nd Quarter SFY 2017 (Oct - Dec 2016): 24.7% [n=163]

Interesting...

Debbie

Debra J. Kane, PhD, RN, PHCNS-BC

MCH Epidemiologist-CDC Assignee | Bureau of Family Health | Health Promotion and Chronic Disease Prevention  
Iowa Department of Public Health | Lucas State Office Building | 321 East 12th Street | Des Moines, Iowa 50319  
P: 515.281.4952 | F: 515.725.1760 | [debbie.kane@idph.iowa.gov](mailto:debbie.kane@idph.iowa.gov)

*Promoting and Improving the Health of Iowans*

--

Julie Allison, MPA

Child Care Bureau Chief

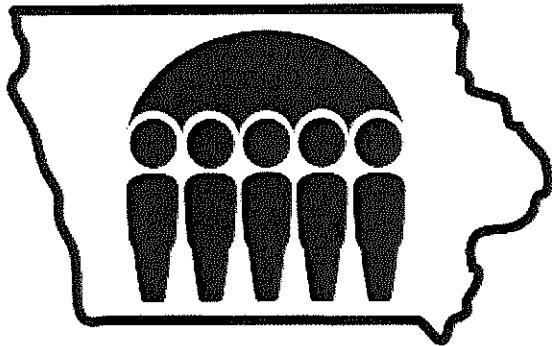
Iowa Department of Human Services/Division of Adult, Children and Family Services

1305 East Walnut, Hoover State Office Bldg., 5<sup>th</sup> floor, Des Moines, Ia. 50319-0114

Phone: 1-515-281-6177

Fax: 515-281-6248

# Iowa Department of Human Services



## ***Family Planning Program***

*Previously Iowa Family Planning Waiver*

October 2017

## Report Summary: Family Planning Program

### Background

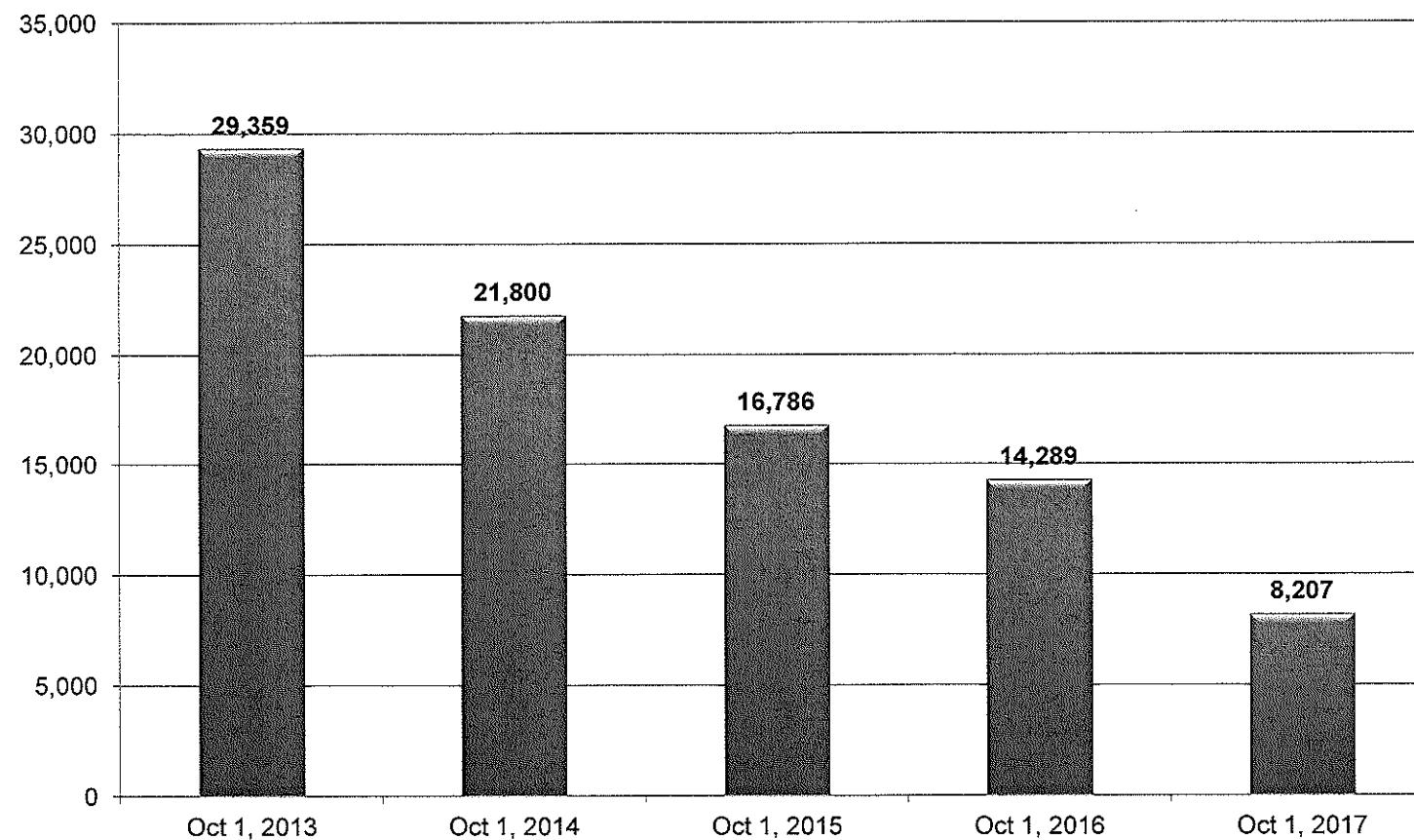
The Family Planning Program (FPP) is for men and women who are 12-54 years of age. The FPP helps with the cost of family planning related services. The FPP is a state-funded DHS program which replaced the Iowa Family Planning Network (IFPN) program. Eligibility and covered benefits did not change. The location where members receive services may have changed. As of July 1, 2017, eligible IFPN members transitioned to the FPP. This program allows men and women to get family planning services only. This program is a form of limited insurance coverage. It does not meet the Affordable Care Act requirements for a minimum essential benefits plan.

### Data Limitations/Considerations

The FPP and IFPN are programs with limited benefits and declining enrollment due to increased health care coverage, as FPP and IFPN do not meet the Affordable Care Act (ACA) definition of 'minimal essential coverage.'

It is important to note that data are collected from in a variety of systems, including eligibility and claims systems. With the recent transition to managed care and the transition from IFPN to the FPP, data may not have been collected in the exact same way, due to differences in claims processing, etc. A work group was assembled to ensure we're accounting for these changes and how they impact the data. The data workgroup developed a data dictionary for the data elements reported in this document. It is located here.

**Figure 1. Number of Enrolled Members**

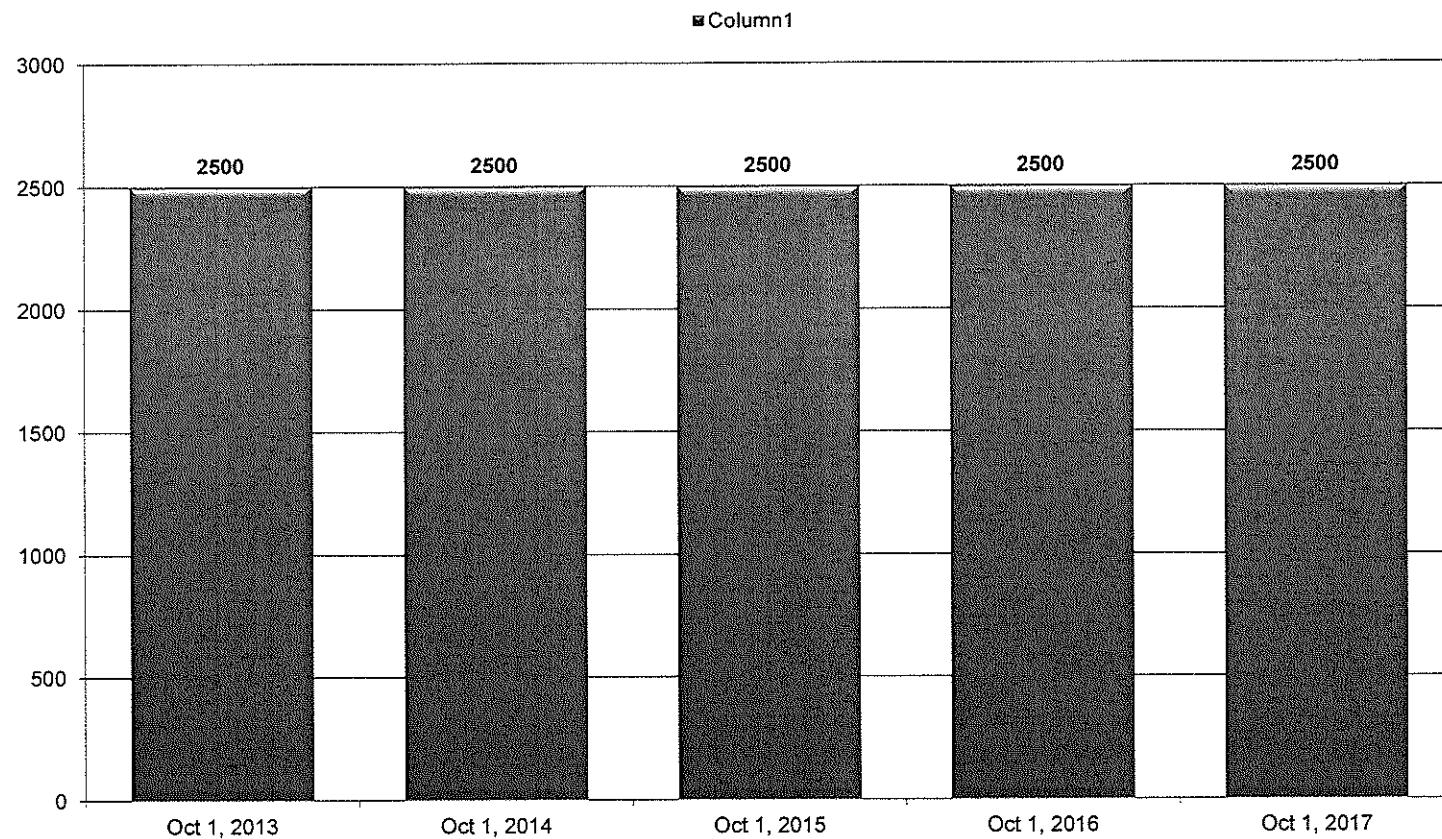


*Unduplicated Enrolled Members' Numbers*

*Data Source: Monthly Medicaid Eligibility Report Mars Report IAMM3700-R001, R002, R003 from MMIS*

*The FPP and IFPN are programs with limited benefits and declining enrollment due to increased health care coverage, as FPP and IFPN do not meet the Affordable Care Act (ACA) definition of 'minimal essential coverage.'*

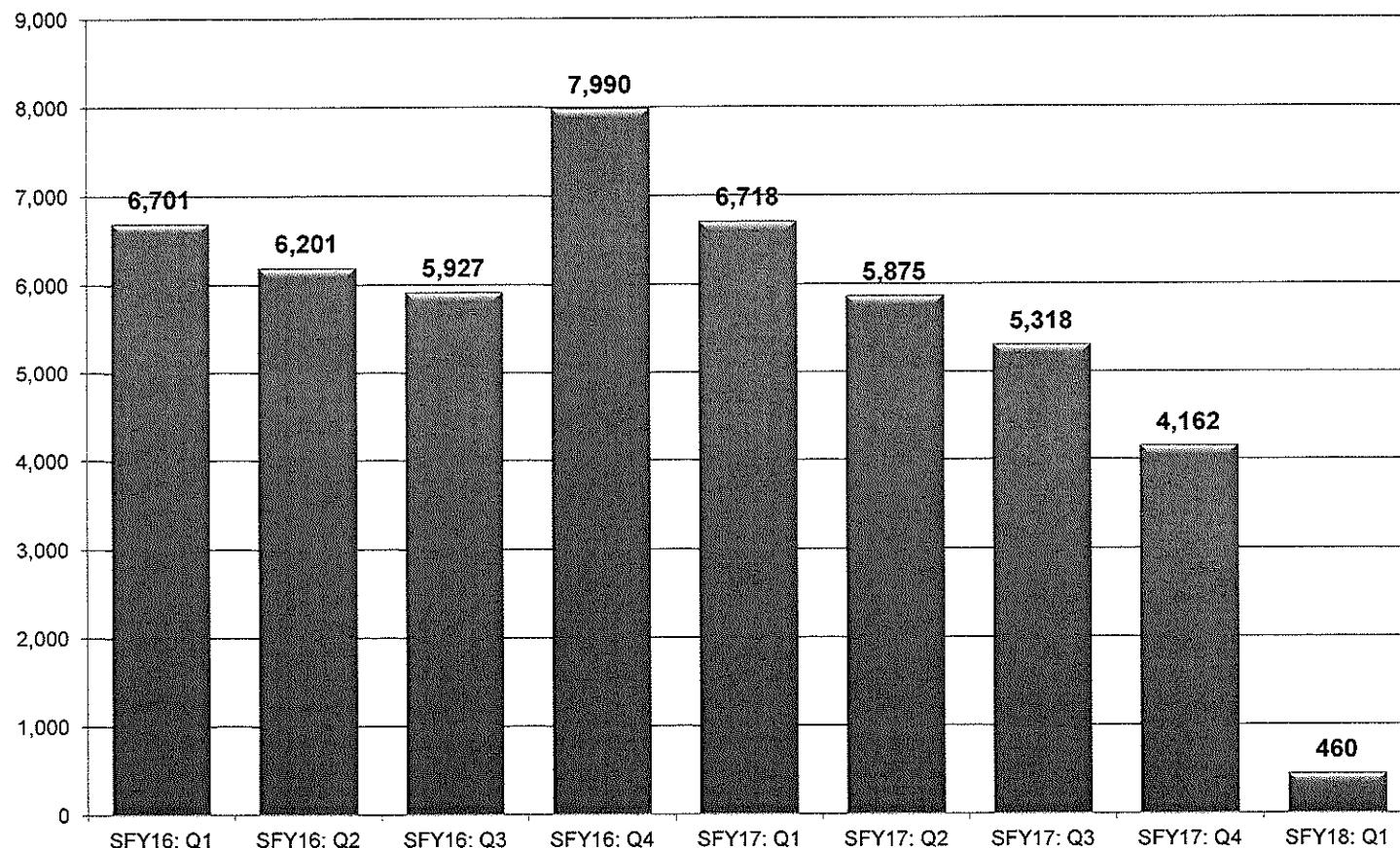
**Figure 2. Confidential Enrolled FFP Members**



Data Source: FPP Eligibility System

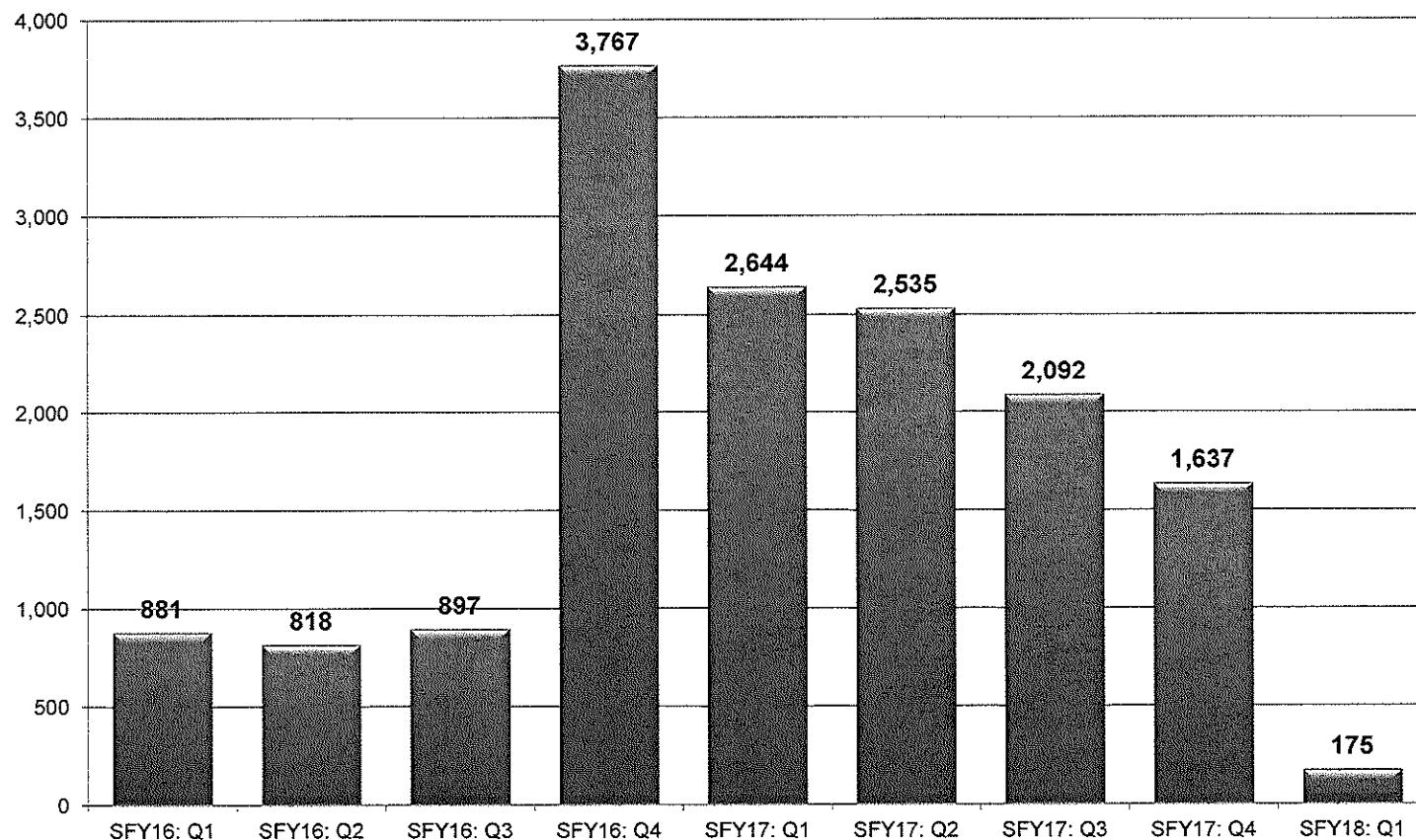
Duplicated Enrolled Members' Numbers (may include members enrolled in Medicaid due to a pregnancy ending)

**Figure 3. Services Accessed by Members**



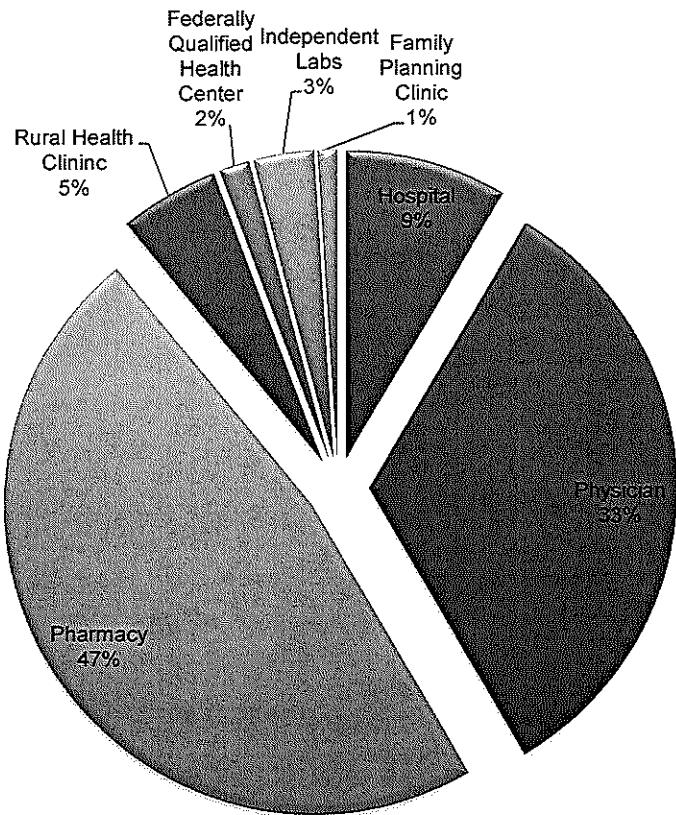
*Data Source: Core Ad Hoc Report/Query*

**Figure 4. Unique Provider Count**



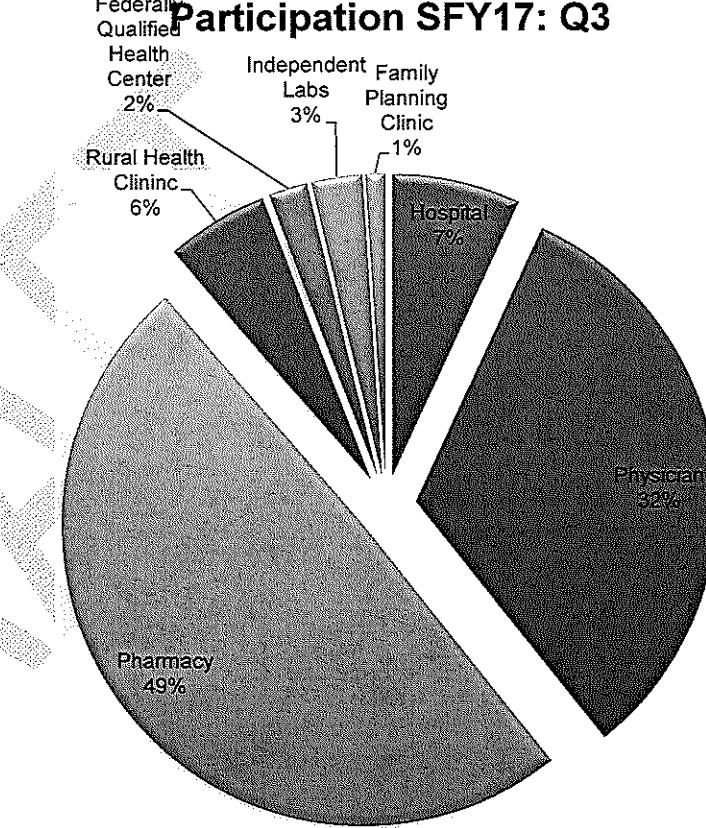
*Data Source: Core Ad Hoc Report/Query*

**Figure 5. Provider Participation SFY17: Q2**



*Data Source: DDM*

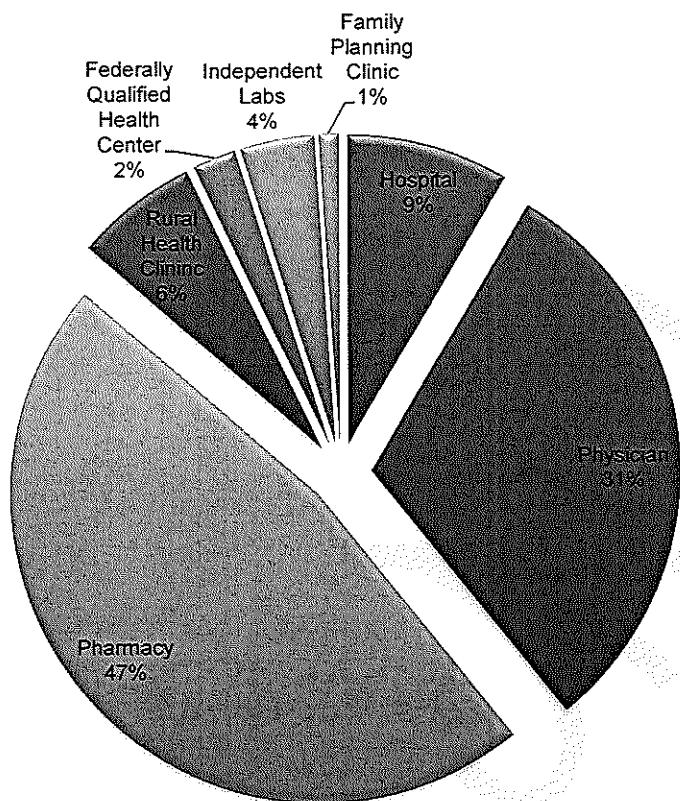
**Figure 6. Provider Participation SFY17: Q3**



*Data Source: DDM*

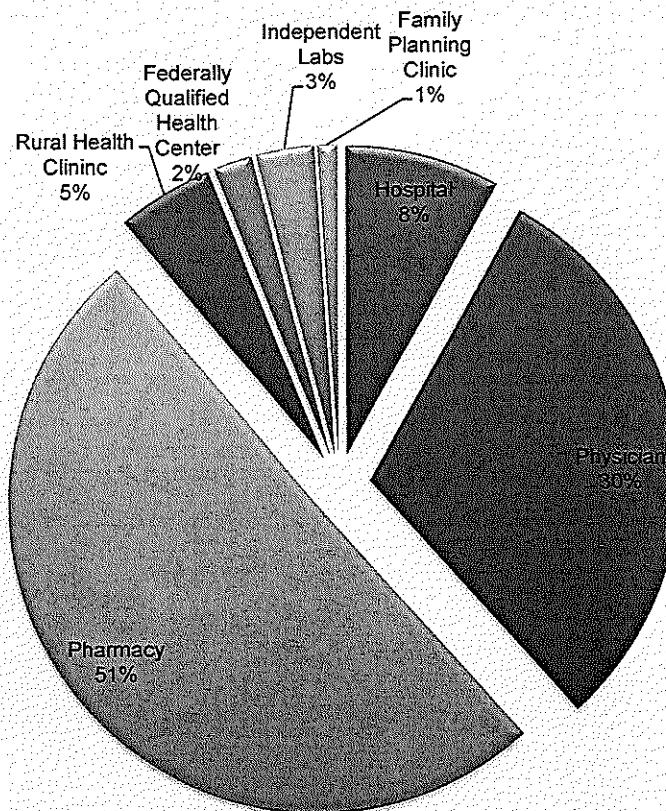
**Comment [KD1]:** Clinic is misspelled on pages 6 and 7.

**Figure 7. Provider Participation SFY17: Q4**



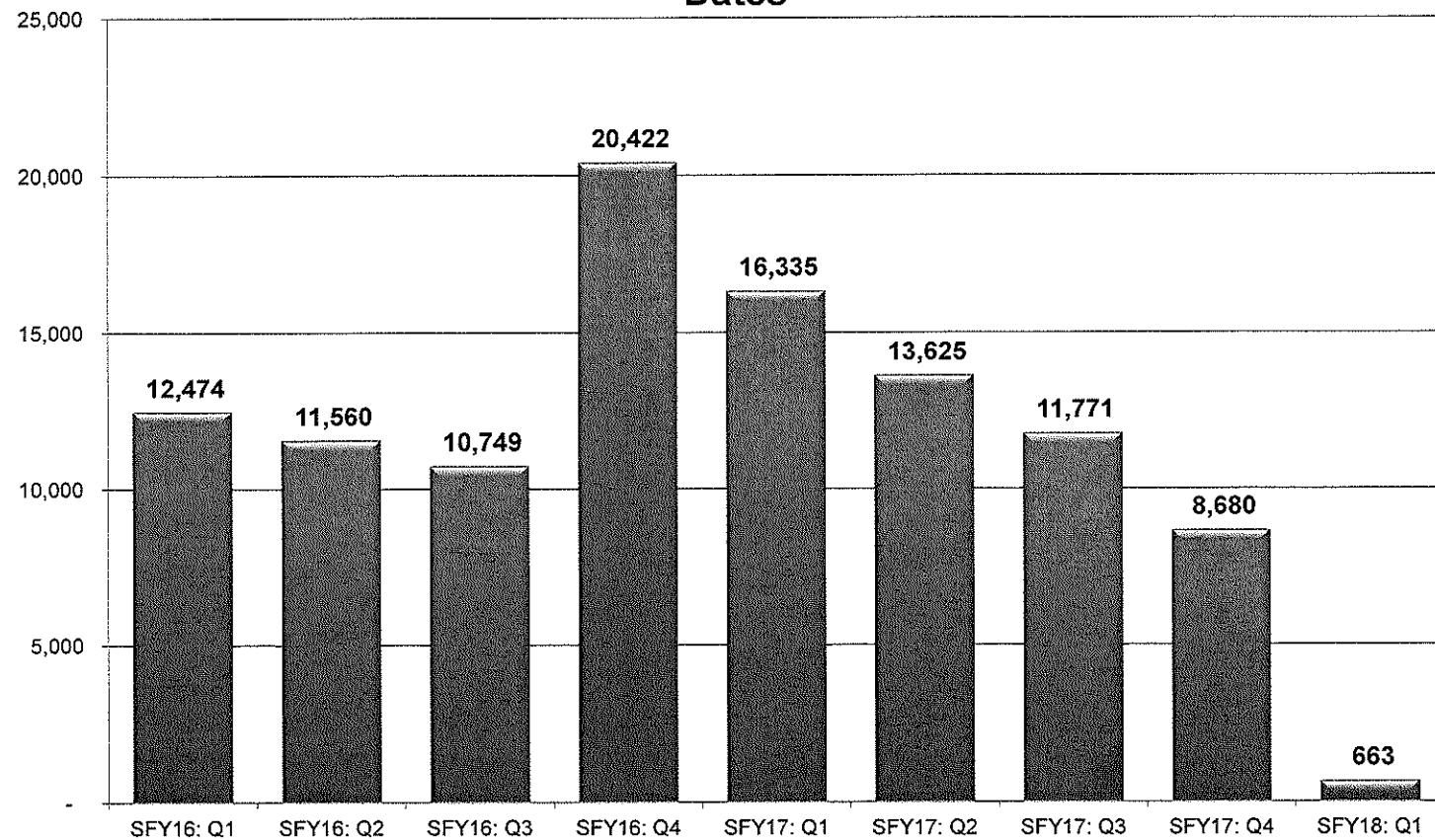
Data Source: DDM

**Figure 8. Provider Participation SFY18: Q1**



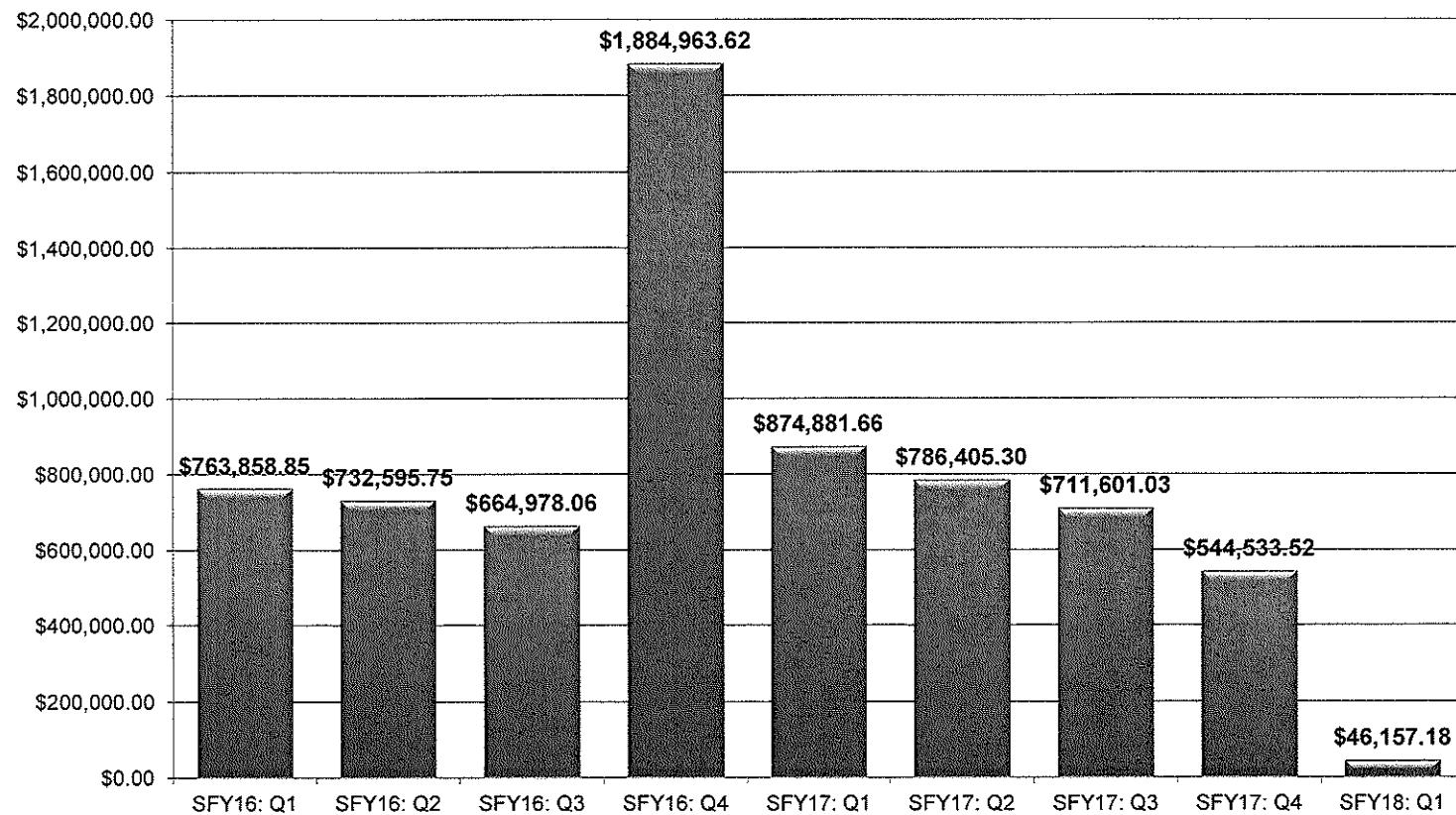
Data Source: DDM

**Figure 9. Count of Paid Claims Based on Claims Payment Dates**



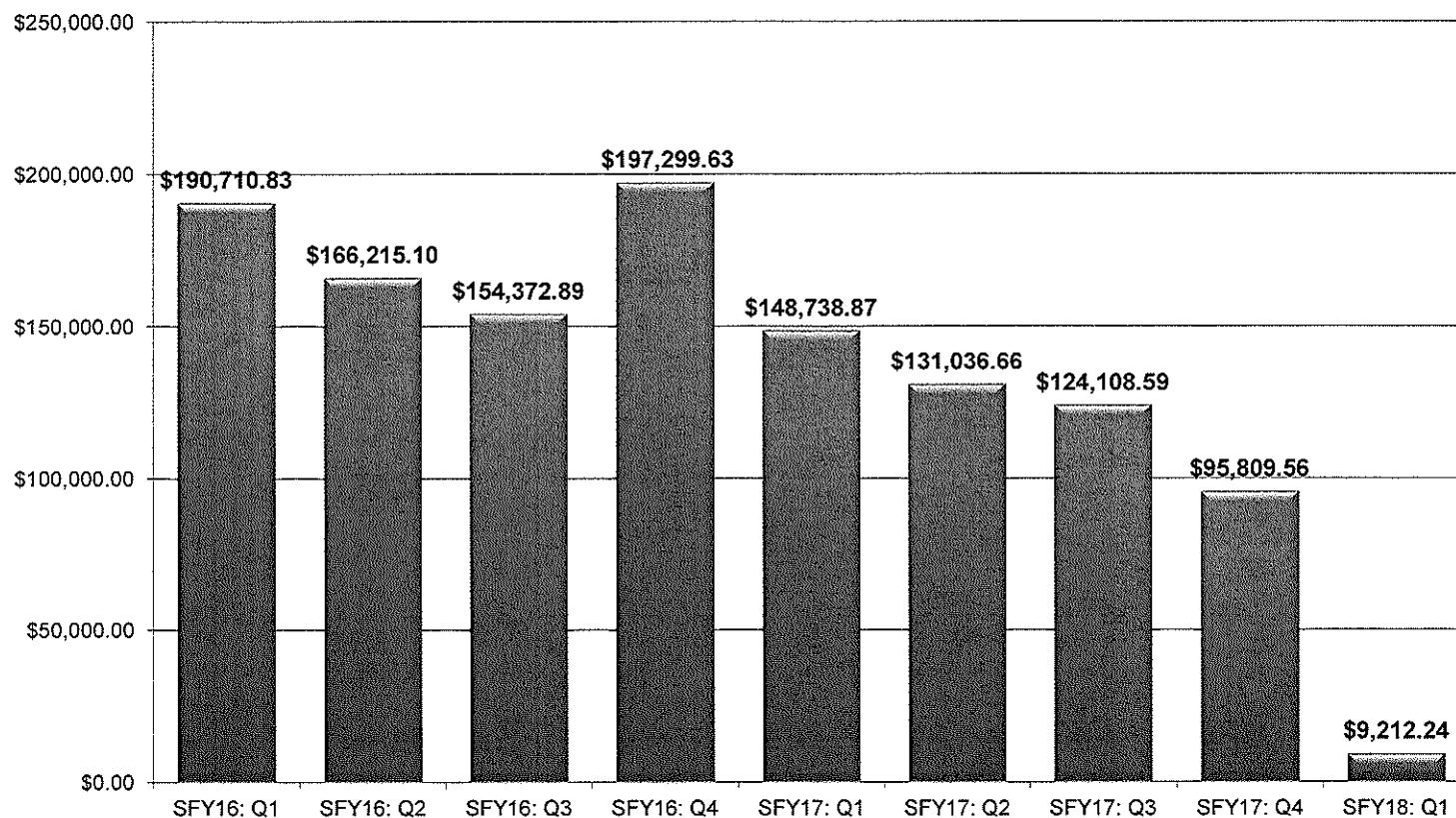
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**Figure 10. Reimbursement of Services**



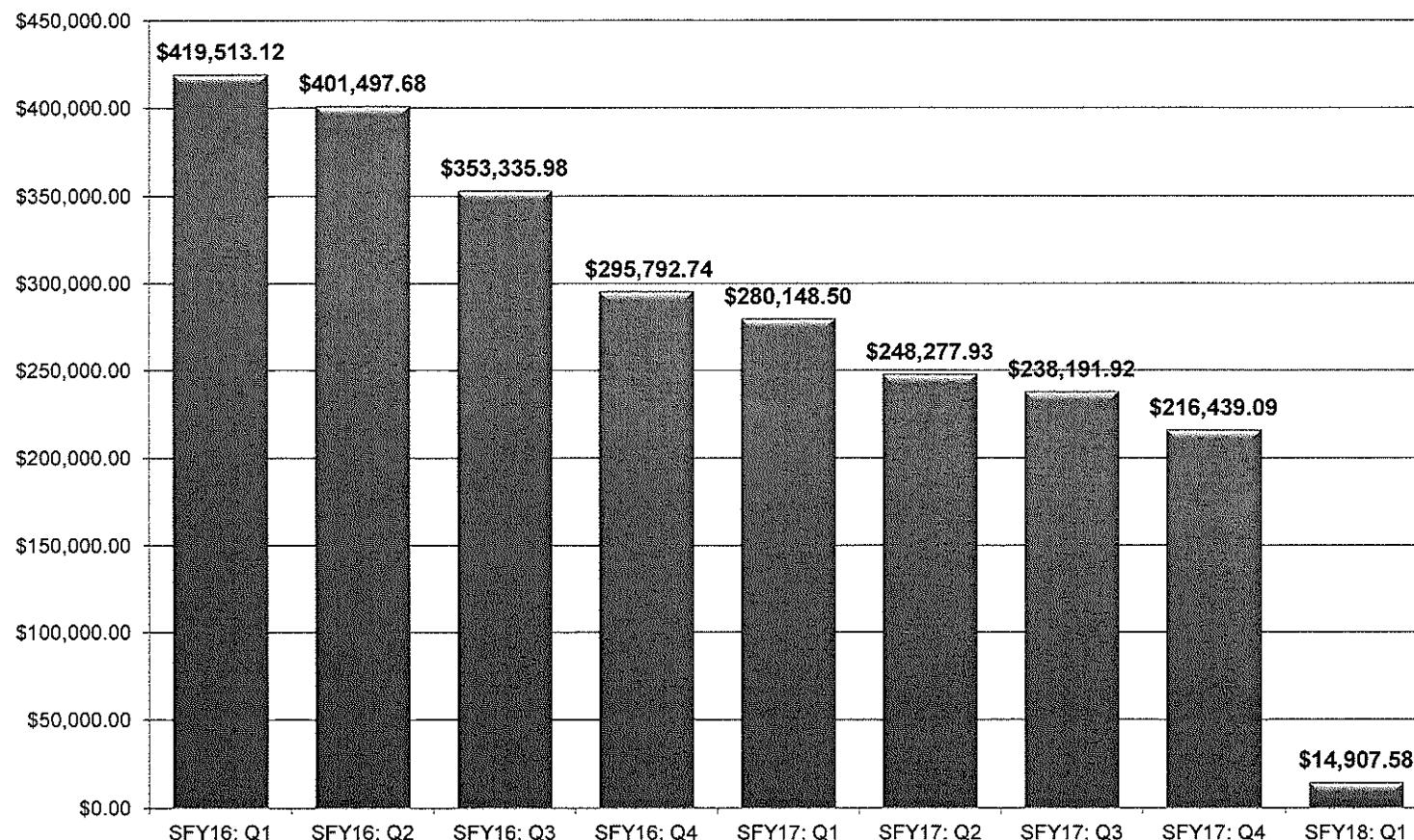
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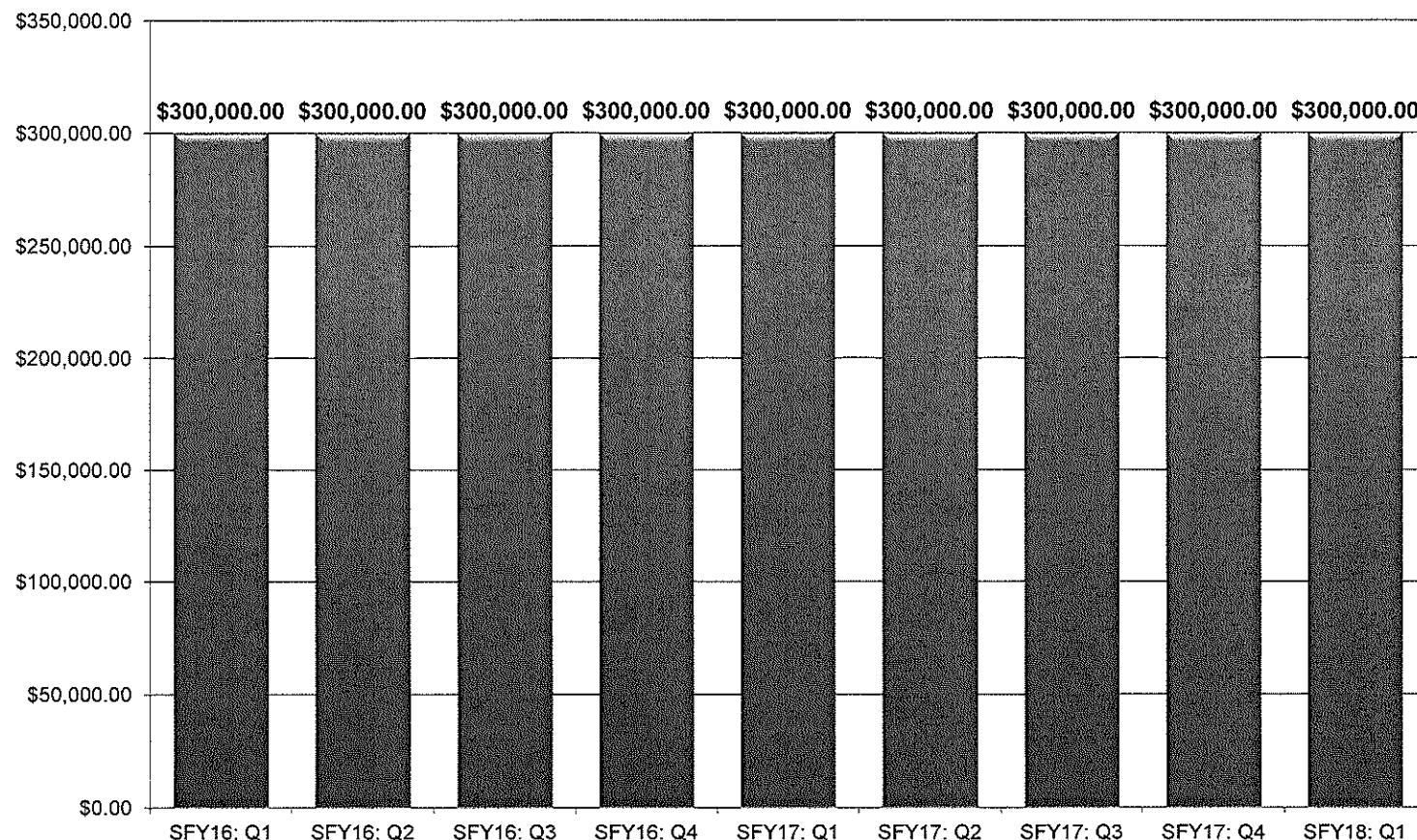
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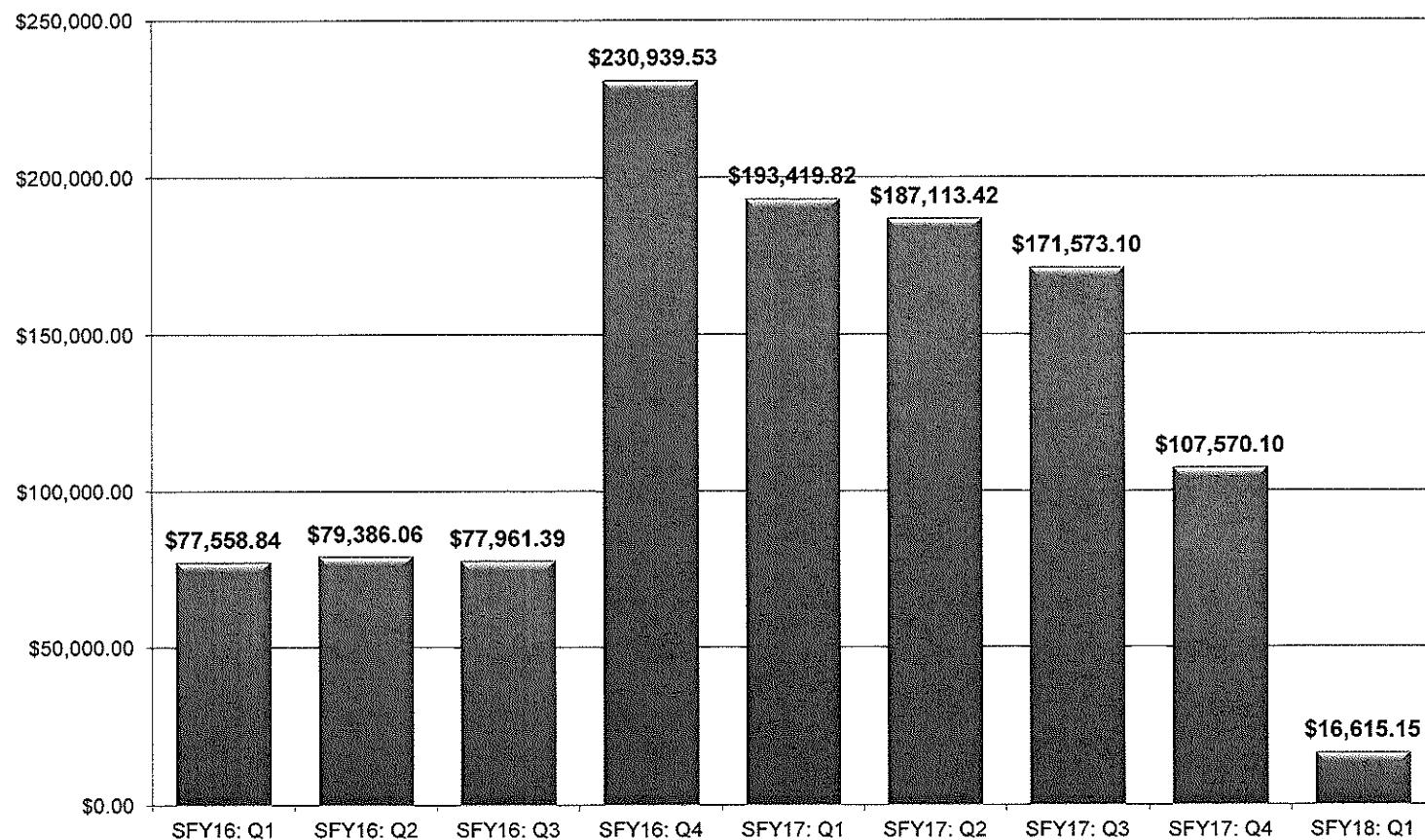
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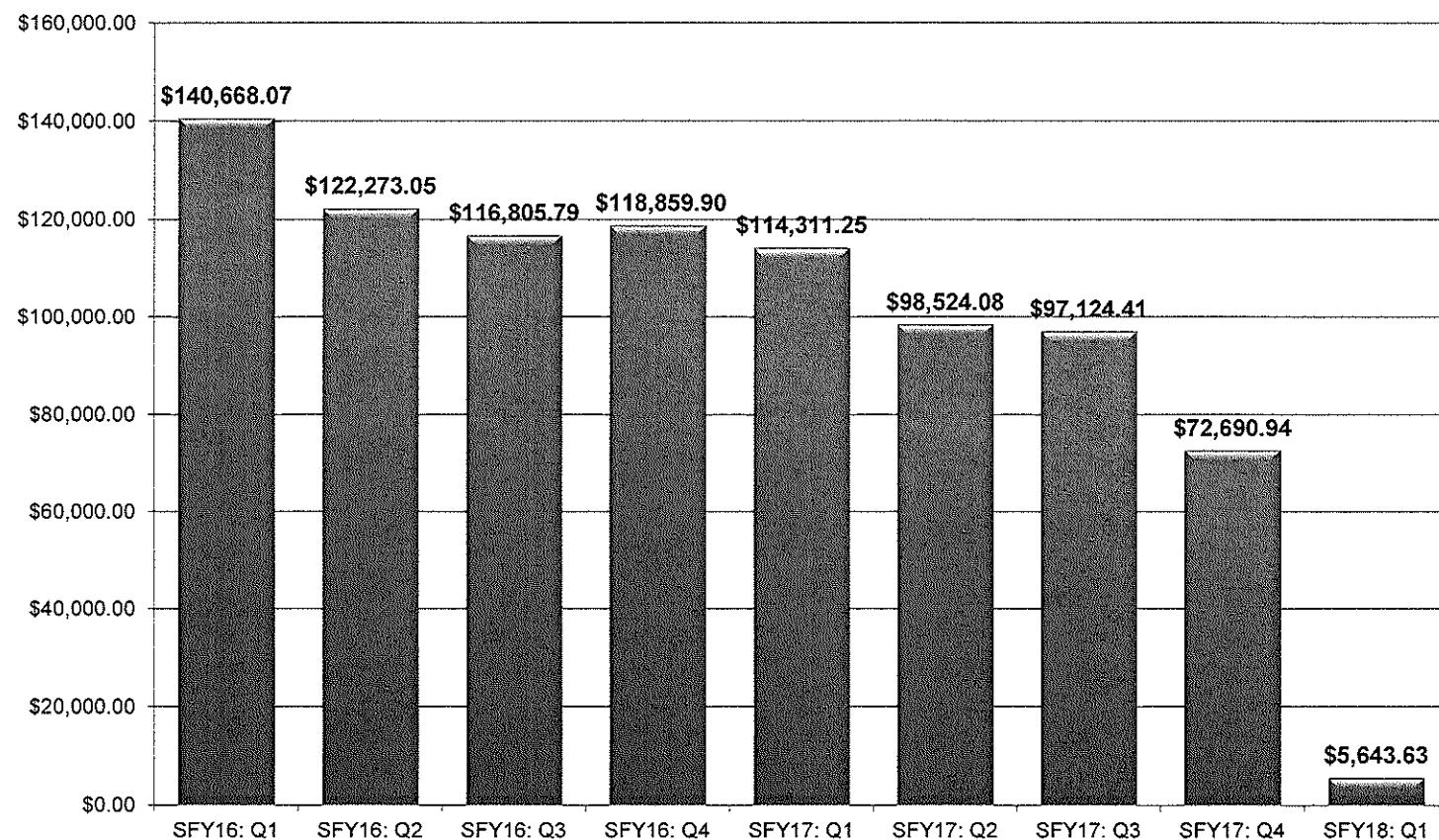
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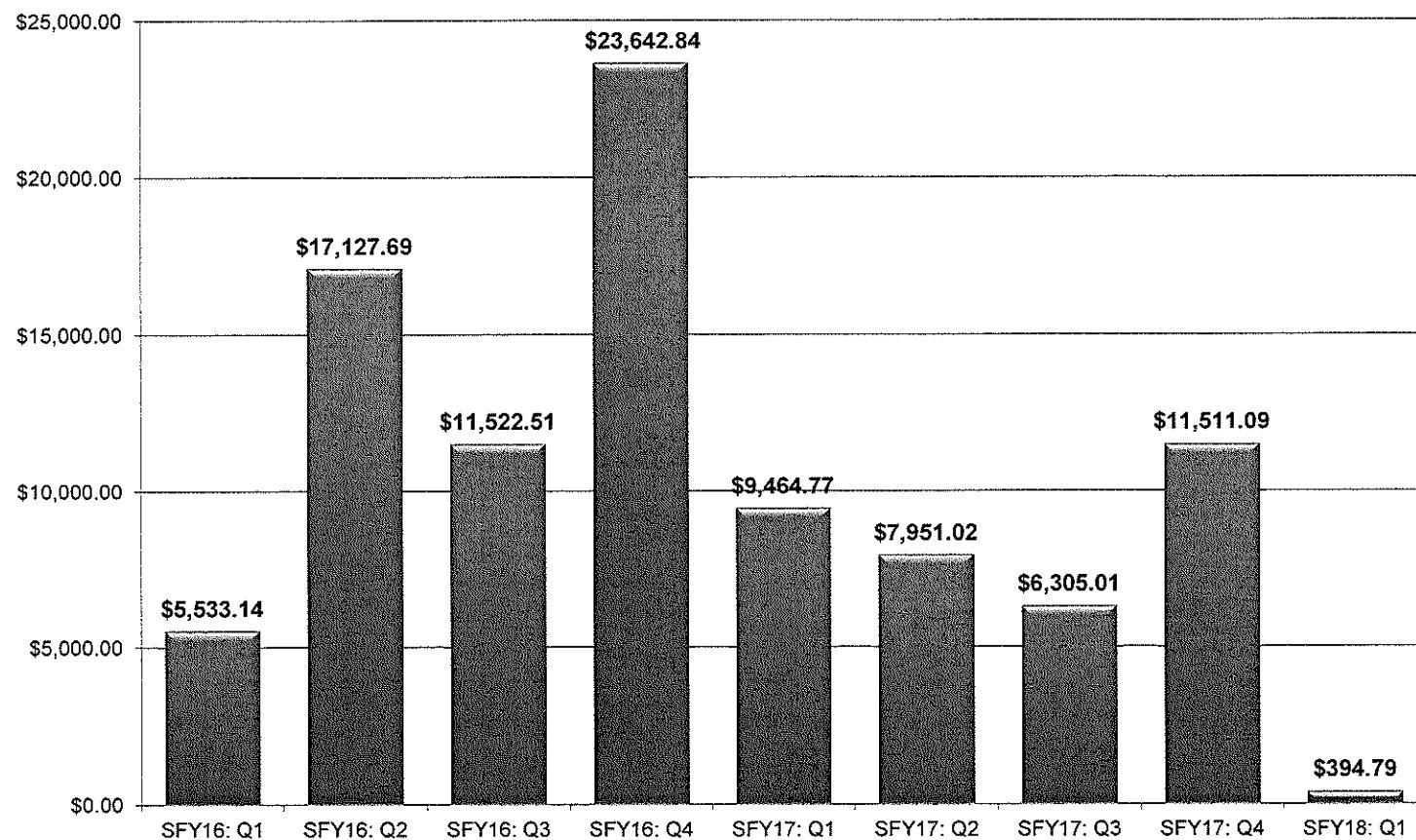
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